



Attention:	Reservations Center
Company:	
Date:	
From:	
Tel:	
e-mail:	

Please book and confirm the following:

Driver Name:		
Car Group:		
Station Pick up:	Date:	Hour:
Flight Number:		
Station Drop off:	Date:	Hour:
Total Days:	Young Driver: Yes <input type="checkbox"/> No <input type="checkbox"/>	
GPS: Yes <input type="checkbox"/> No <input type="checkbox"/> Language: _____	Super CDW Per Day Yes <input type="checkbox"/> No <input type="checkbox"/>	
Credit Card details:	Baby Seat : Yes <input type="checkbox"/> No <input type="checkbox"/> Booster: Yes <input type="checkbox"/> No <input type="checkbox"/>	
No.: _____ Expire date: _____ Credit Card Company: _____	Passport No.:	
Remarks:		