

Allure Transportation, Shuttle, and Limo Services
Please complete this form and fax to (504) 737-1492
or scan then email to peter@allureTLC.com

Client Contact Information

Date of Event: _____

Clients Name: _____

(Full Name, Name on the Reservation, Responsible Individual)

Name of Organization or Group: _____

Cell Phone () _____

Home Phone or alternate contact number () _____

Email address _____

Home address

Street _____

City _____

State _____

Business address (if applicable)

Street _____

City _____

State _____

“Event” Description

Type of Event: _____

(Example: Airport, Hotel, Wedding, Anniversary, Dinner & Show, Night Out, Prom)

Number of Passengers (max 13 per vehicle): _____

Number of Vehicles: _____

Type of vehicle desired: _____

(MB Sprinter-Limo, MB Sprinter-Coach, Lincoln Stretch, Cadillac Sedan, Cadillac Escalade)

Start Time (exact pick up time): AM _____ PM _____

End Time (drop off at last stop): AM _____ PM _____

Number of Hours: _____

(the number of hours you are going to reserve the vehicle for)

If you will be splitting the time (driver and vehicle leave the site):

Initial start time: AM _____ PM _____

Drop off: AM _____ PM _____

Pick up again: AM _____ PM _____

End time: AM _____ PM _____

Initial pick up address (Home address or other address, please be specific)

1st: _____

Name _____

Street _____

City _____

Ending Address (last stop where last passenger exits the vehicle)

"Last" stop:

Name _____

Street _____

City _____

Additional Stops

please list name and street address (if possible):

2nd Stop

Name _____

Street _____

City _____

3rd Stop

Name _____

Street _____

City _____

***If Alcohol will be consumed in limousine:**

Number of passengers under 21: _____

If there are any passengers under 21 years of age, please provide the name of the designated person/"designee" who will be present in the limousine and who will assume the legal responsibility for all underage passengers:

Name: _____

For events in which minors will be traveling WITHOUT the presence of an adult, please provide the name of the designated person/"designee" who will sign a separate document of legal responsibility for the conduct and behavior of the minor(s) using our vehicle:

Name: _____

This form must be downloaded to your desktop to use the form fill interactivity.
Or you can print the form and fax it to the address above.