

**NEW WAVE LIMOUSINE LLC**

**WEDDING/PROM/NIGHT OUT/SWEET SIXTEEN  
CONTRACT**

**TOOL FREE: 866-416-1529**

**TEL: 718-285-9401**

**FAX: 718-554-0373**

NAME (BRIDE IF APPLICABLE) \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE (H) \_\_\_\_\_ (CELL) \_\_\_\_\_

NAME (GROOM IF APPLICABLE) \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE (H) \_\_\_\_\_ (CELL) \_\_\_\_\_

PICKUP ADDRESS \_\_\_\_\_ TIME \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

CROSS STREET \_\_\_\_\_ # OF PASSENGERS \_\_\_\_\_

CHURCH \_\_\_\_\_ TIME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_

RECEPTION/DESTINATION \_\_\_\_\_ TIME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_

SPECIAL REQUEST \_\_\_\_\_

**DATE OF AFFAIR**

**S M T W T H F SA**

**Sub Total** \_\_\_\_\_

**Tolls/Parking**

**Service Charge** \_\_\_\_\_

**TOTAL \$** \_\_\_\_\_

**Deposit** \_\_\_\_\_

**BALANCE** \_\_\_\_\_

LIMOUSINES	HOURS/OVERTIME	AMOUN
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

COMMENTS: \_\_\_\_\_

NO DATE IS GURANTEED UNTIL DEPOSIT AND SIGNED CONTRACT IS RECEVID BY THIS OFFICE

The undersigned agrees that, in any event that the leased or rented vehicle suffers or sustains a mechanical Problems so as to render it inoperable, at is discretion, may provide a vehicle of similar kind or quality, and That such replacement vehicle will satisfy responsibility under this agreement. No credit cards or personal Checks accepted for final payment.

I, the undersigned agree to pay New Wave Limousine LLC 1/3 of the balance on day of signing contract With the remaining balance due 15 days prior to service, if cancellation is made, there will be liable for full Payment of the order. Customer will be liable for the return of the car in good condition.

NEW WAVE LIMOUSINE LLC RESERVES THE RIGHT TO CANCEL ANY CONTRACT WITHIN 72 HOURS FOR A FULL REFUND.

Prepared by: \_\_\_\_\_ Date \_\_\_\_\_

Customer's Signature: \_\_\_\_\_ Date \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**Method of Payment**

Cash  Check

**Check No.** \_\_\_\_\_

Visa  Master Card

Amex  Discover

**Credit Card #** \_\_\_\_\_

**Exp. Date** \_\_\_\_\_

**Name:** \_\_\_\_\_

NEW WAVE LIMOUSINE  
RETAINS THE RIGHT TO  
TERMINATE ANY JOB  
WITH CAUSE

CUSTOMER IS LIABLE  
FOR DAMAGES

NOT LIABLE FOR ANY  
BELONGINGS LEFT  
IN LIMOS

NO ALCOHOL SERVED  
TO MINORS