



Your Global Transportation Partner

PROM CONTRACT

Contract No.

Prom Date: _____

Prom Location:

Type of Vehicle:

Maximum # of Passengers:

(Vehicle not to exceed maximum number of passengers.)

Client Name: _____

Student Name: _____

Address: _____

Phone: _____

Email Address: _____

Emergency Contact: _____ Phone: _____ Cell: _____

Emergency Contact: _____ Phone: _____ Cell: _____

Pick-up Information: Pick-up Time: _____ Name of passenger at initial pick-up

Pick-up address:

Phone No. _____ Cell No. _____

Venue: _____

Final Destination:

Special Instructions:

Overtime Authorized: YES NO

THE PROM PASSENGER FORM ON PAGE 3 MUST BE FILLED OUT COMPLETELY

THE INFORMATION BELOW MUST BE FILLED IN COMPLETELY

Concorde Worldwide | 900 Route 33 | Freehold | NJ | 07728 | 732.577.0023 | Fax: 877-588-6722 [Concorde Worldwide](#)

Vehicle Must Remain with Prom Goers. Vehicle CANNOT Be Used by Persons Not Named in Contract.

Prom Package Selected: _____ 6 HR BASE RATE = _____

A prepaid non-refundable deposit of \$ _____ received on: _____ made by:

Cash Check Credit Card: _____ expiration: _____
(credit card type) (month/year)

Additional tolls, over-time and gratuity are not included in this quote and will be collected by the chauffeur.

Amount:	\$ _____	STC @ 17.5%	\$ _____
Travel Time (wait)	\$ _____	Fuel Surcharge:	\$ _____
Gratuity 20%	\$ _____	Deposit	\$ _____
Tolls:	\$ _____	Balance:	\$ _____

BALANCE of \$ _____ due at first pick-up: _____
(Contact and Address of first pickup)

ADDITIONAL OVERTIME will be charged after six hours at the vehicle rate of \$ _____ per-hour, plus expenses: 20% gratuity, tolls, fuel and 17.5% STC. Hourly rates are calculated from local area pick-up to local area drop-off. **Travel time** will be charged for a **drop-off** that is **not in** our **local** area (i.e.: Wildwood=5hrs travel time; Seaside=1 hr travel time, etc.) which is calculated from the drop-off time at final destination. **Damages:** The client assumes full financial liability for any damage to the vehicle caused during the duration of the rental or authorization by them or any members of their party. A Sanitation Fee of \$275.00 (minimum) will be assessed for any interior cleaning and or repair required as result of behavior or negligence.

MINOR PASSENGER AGREEMENT FOR LIMOUSINE SERVICE

All parties entering into this contract—including the limousine company, the teen passengers and the parents—agree to the following:

1. It is unlawful for a minor to possess or consume alcoholic beverages.
2. There will be **no alcoholic beverages or illegal substances** transported in the passenger compartment or carried in the trunk, or any other locked compartment of the vehicle.
3. Chauffeur retains the right to examine all bags or parcels to be placed in the vehicle to determine if they contain alcohol or illegal substances.
4. If it is determined, at any time, that any passenger(s) are found to have in their possession, or have been at any time during the course of the service consuming alcohol or an illegal substance, the service shall be terminated, then and there. Parents will be required to pick up their children.
5. If termination results, all money shall be forfeited and a parent or guardian shall be notified. Driver shall retain the option of returning to point of pick-up or ending the service at the point of infraction.
6. There will be **no smoking** in the vehicle.
7. At no time during the course of the service will individuals not entered on page 3 of this agreement be permitted access to or transportation in the vehicle.
8. Due to the high risk insurance factor, the divider windows will be rendered inoperable throughout the transportation services. Divider windows will remain open at all times allowing supervision by chauffeur.
9. Each parent of a teen passenger must provide a phone or cell phone contact number in case of a violation or emergency. Concorde Worldwide will not be held liable for circumstances beyond our control including but not limited to road conditions, mechanical breakdowns and weather.

I, the undersigned, agree to pay the balance due at the pick-up. I understand, if cancellation is made there will be NO REFUND of deposit. Client is responsible for all costs involved in collection of this billing including but not limited to court and attorney's fee.

I HAVE READ AND UNDERSTAND THIS CONTRACT:

(Client's signature) Date _____/_____/_____

(Print Name - must be over 25 years of age) Relationship to passenger _____

	Passenger Name	Passenger Address	Passenger Home Phone	Passenger Cell Phone
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	Passenger Name	Passenger Address	Passenger Home Phone	Passenger Cell Phone
25				
26				
27				