

Please, print this page, fill in the application, provide a clear copy of your credit card (front and back) with signature, and FAX the information to us.

Thank you!



AIRPORT TAXI & LIMO
2720 S. RIVER RD.
DES PLAINES, IL 60018
800-707-0380 FAX 847-296-0692

CORPORATE ACCOUNT APPLICATION

TRAVELLER INFORMATION:

NAME: _____

ADDRESS: _____

COMPANY: _____

TELEPHONE NUMBER: _____ FAX NUMBER: _____

PLEASE PROVIDE ANY ADDITIONAL INFORMATION THAT YOU BELIEVE WILL HELP US TO SERVE YOU BEST:

CIRCLE ONE: AMEX VISA MASTERCARD DISCOVER DINERS:

_____ EXPIRATION _____

CREDIT CARD BILLING ADDRESS: _____

I _____ AUTHORIZE AIRPORT TAXI & LIMO TO CHARGE MY CREDIT CARD FOR FUTURE PAYMENT OF TRANSPORTATION AND SERVICES PROVIDED AND COMPLETED

SIGNATURE OF APPLICANT _____

DATE _____