



1280 Route 27
Colonia, NJ 07067
Toll-Free: 888-437-0364
Fax: 848-628-0061
www.dg-limo.com
bookings@dg-limo.com

CREDIT CARD AUTHORIZATION

Customer Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: () _____ - _____ Fax: () _____ - _____

CREDIT CARD INFORMATION

Please Circle One: VISA MASTER CARD AMEX

Credit Card No.: _____ Exp. Date: _____

Amount to be charged: \$ _____

Name of Cardholder: _____
(Please Print - As it appears on the credit card)

City: _____ State: _____ Zip Code: _____

Phone: () _____ - _____ Fax: () _____ - _____

Signature: _____ Dated: _____
(As it appears on the credit card)

D&G Limousine Service Polices: *(Please read & sign)*

I am authorizing D&G Limousine Service to charge my credit card for the above amount, understanding that the amount designated as a “deposit” within my contract is non-refundable. I have read and understand the terms and conditions as outlined within my contract and fully agree to comply with all of them. I am waiving my right to contest the above charge, as well as any additional charges that are outlined within the terms of my contract. I acknowledge this document and my contract as legally binding in lieu of my availability to sign the D&G Limousine charge slip.

Signature: _____ Dated: _____