

Date                                  /                                  /

Name                                  \_\_\_\_\_

Postal Address                    \_\_\_\_\_  
 \_\_\_\_\_

<p><i>Champagne Weddings and Horse Drawn Carriages</i></p> <p>8 Arline Street Waterford 4133 Ph 07 3805 1819 Fax 07 3805 3658</p>
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Thank you for your inquiry regarding our Horse Drawn Carriages for your School Formal.

The form below ensures the arrival of your vehicle to the appointed address thus beginning your evening with the prestige it deserves and the service you expect.

Please return this form with a 50% DEPOSIT to make a booking, also please ensure the details on the form are correct and that the form has been signed where indicated.

The balance is due 2 WEEKS PRIOR TO THE FORMAL. Failure to pay this can result in automatic cancellation of the vehicle.

FORMAL DATE                    DAY \_\_\_\_\_ DATE \_\_\_\_\_

VEHICLE TYPE                    \_\_\_\_\_ NO REQUIRED \_\_\_\_\_  
 Legal to carry \_\_\_\_\_ passengers

ADDRESS

DEPART                              \_\_\_\_:\_\_\_\_ PM \_\_\_\_\_

MOBILE PHONE NUMBER \_\_\_\_\_

FUNCTION VENUE

ARRIVE                               \_\_\_\_:\_\_\_\_ PM \_\_\_\_\_

**CONDITIONS OF HIRE**

1. Vehicle will depart your designated address at the time allocated with no exceptions and will not deviate from the above itinerary.
2. Stopping for OR the consumption of alcohol is NOT PERMITTED as instructed by School Principals
3. Damage occurring in any vehicle through misconduct will result in repairs being carried out at your expense.
4. Hire is for ½ hr including photo time.

Cost of Vehicle hire as per above details                    \$ \_\_\_\_\_

Enclose Deposit – (Min 50% is non-refundable upon cancellation)                    \$ \_\_\_\_\_

Balance is Due by                                  /                                  /                                  \$ \_\_\_\_\_

I UNDERSTAND THE ABOVE CONDITIONS OF HIRE AND WILL ABIDE BY THEM FULLY

STUDENT NAME                    \_\_\_\_\_

SIGNATURE                              \_\_\_\_\_

PARENT NAME                              \_\_\_\_\_

DATE / /