

RED CAR SERVICE REQUEST FORM

PLEASE COMPLETE THIS FORM AND EMAIL AT LEAST (5) FIVE BUSINESS DAYS BEFORE DATE OF SERVICE REQUEST. 2021 RATE FOR SERVICE (1) ONE WAY IS \$86.80/person AND DOES INCLUDE THE DEFAULT TIP AMOUNT OF \$10.00/way.

PLEASE COMPLETE AND EMAIL TO FSCLERK@UOGUELPH.CA FOR PROCESSING

PASSENGER INFORMATION:				
FIRST NAME:	LAST NAME		TITLE:	
CONTACT PHONE NUMBER: () _ Please indicate: CELL PHONE: 🗖				
EMAIL:				
Please Indicate: PICK UP ADDRESS:	DROP OFF ADDRESS:			
ADDRESS:	CITY: _		_ POSTAL CODE:	
CLOSEST MAIN INTERSECTIONS TO AD	DRESS:			
NOTES/DIRECTIONS:				
FLIGHT INFORMATION:				
Please Indicate: PICK UP ADDRESS:	DROP OFF ADDRE	SS: 🗖		
Please indicate: ARRIVAL: 🗖	DEPART: 🗖			
ARRIVAL/DEPART TIME: HH	: MM	(i.e. 3:3	0 = 15:30)	
AIRLINE: AIRLI	NE CODE:	FLIGHT NUMB	ER:	
FLIGHT DESTINATION/ ORIGIN:		(Country where	e the flight started)	
Please Indicate Flight Type: DOMESTIC	: 🗖 INTERNATIONAL: 🗖	USA/CANADA:		
NOTE:				
AIRPORT INFORMATION:				
Please Indicate: PICK UP ADDRESS:	DROP OFF ADDRE	SS: 🗖		
PEARSON INTERNATIONAL: 🗖 HAM	ILTON INTERNATIONAL: 🗖	WATERLOO INTER	NATIONAL: 🗖	
PAYMENT INFORMATION:				
CODING:	6	2408 TIP AMOUN	T FOR SERVICE: \$	
If this is a Round	trip then you will need to co	omplete this form	or each flight.	