

SOCIAL FUNCTION TAXI REQUISITION FORM

FOR YOUR SOCIAL COMMITTEE/H.R. REPRESENTATIVE

Company Name: _____

Contact Name: _____ Position: _____

Billing Address: _____

City: _____ Province: _____ Postal Code: _____

Phone 1: _____ Phone 2: _____

Email: _____

Date of Function: _____ Location of Function: _____

Approx. number of Guests: _____ Approx. start time: _____ Approx. end time: _____

To identify those authorized to charge the cab fare to your account, please initial all your choices from the options below and we will endeavor to follow your instructions:

- | | | |
|--|---|---|
| A. Passenger will have a taxi voucher issued by you (include sample: jpeg or pdf only) | Y | N |
| B. Passenger to print name and/or clock number on cab charge slip | Y | N |
| C. Passenger will have business card to attach to cab charge slip | Y | N |
| D. Limit trip to local address only (within Guelph city limits) | Y | N |
| E. Allow trip to regional address outside of Guelph (Kitchener, Cambridge, Fergus, etc.) | Y | N |
| F. Allow trips with no restrictions | Y | N |
| G. May charge cab fare to the function | Y | N |
| H. May charge cab fare from the function to home address only | Y | N |
| I. May charge cab fare to alternate address, e.g.: hotel, bar, friends house | Y | N |
| J. Passenger may use our service more than once after leaving function | Y | N |

Signed: _____ Date: _____

This document may be printed and sent by mail, or dropped off at our office. Using the button below for electronic submission is equal to a signature. Thank You for considering Canadian Cab Ltd.