

Chicago Dream Limousine

Transport of a Minor Child Agreement

- _____ has my permission to travel with Chicago
(Name of Minor Child)
Dream Limousine Service on ____/____/____.
- I give permission for Chicago Dream Limousine to enlist medical treatment in the case of an emergency. **(Please detail any special medical needs your child may have on the back of this form.)**
- I understand that it is unlawful for minors (people under the age of 21) to consume alcohol. I agree that no alcoholic beverages or other illegal substances will be brought into the vehicle during the course of this trip. If any minor child is found to have been using any illegal substance during this trip, the vehicle will return to the point of origin and the responsible party will be expected to pay the full rate for the trip.
- I understand that only parent/guardian consent can change the itinerary provided on the signed contract.

Signatures/Authorizations

Parent/Guardian Signature

_____/_____/_____
Today's Date

Parent/Guardian Printed Name

_____/_____/_____
Date of Trip

Contact Information

Home Phone

Work Phone

Cell Phone

Office Use

Special Event Point-to-Point Other C.D.L. Initial _____