

The **Cobo** Hospitality Group
hospitality & business services

Cobo Conference/Exhibition Center
One Washington Boulevard
Detroit, Michigan, 48226
Phone: (313)567-2525 Fax: (313)567-7318
www.cobo-info.com



cobo-info



SAE 2008

AIRPORT SHUTTLE RESERVATION FORM

LAST NAME FIRST NAME

BUSINESS NAME

ADDRESS SUITE

CITY / STATE / ZIP

PHONE FAX

MOBILE EMAIL

We require a mobile phone # for emergency contact at the airport and/or with the passenger is in Detroit.

HOTEL

ARRIVAL INFORMATION

Note: Shuttle service to Downtown Detroit Hotels only.

DAY OF WEEK ARRIVAL DATE

FROM CITY AIRLINE

FLIGHT # FLIGHT TIME

DEPARTURE INFORMATION

Note: We require a minimum 2 hours for returns shuttles due to construction/traffic.

DAY OF WEEK DEPART DATE

DOM / INTER AIRLINE

FLIGHT # FLIGHT TIME

PAYMENT INFORMATION

Note: Gratuities are additional and payable to the driver.

TRIP TYPE – One Way / Roundtrip FARE – One Way \$28.00 U.S per person

TAX (6%) FARE TOTAL PAYMENT TYPE

VISA / MC

NAME ON CARD

CREDIT CARD # EXPIRY

SIGNATURE DATE

Note: We require signature of card holder. This document will serve as authorization for the Cobo Hospitality Group to be charge the above credit card the amount shown. The customer understands that by signing this document, they agree to our company policy which is attached on the reverse side of this reservation form.