

*\*If the vehicle driver is different from the purchaser (as in a gift rental), please call us at 703.785.9357 before completing this form.*

How heard/Referred by: \_\_\_\_\_

## Self-Drive Rental Reservation Form

Name of Vehicle Driver*		Occasion	Occupation/Job Title	
Street Address		Date of Birth (MM/DD/YYYY)	Social Security No.	
City, State	Zip	Driver's License No.	Issuing State	Yrs Licensed
Home Phone	Cell Phone	Auto Insurance Carrier	Auto Insurance Policy No.	
Work Phone	Email Address	Auto Ins. Agent's Name	Auto Ins. Agent's Phone	

**AUTHORIZATION:** I, \_\_\_\_\_, the Undersigned, hereby authorize Capital Dream Cars, 1600 Tysons Boulevard, Suite 800, McLean, Virginia 22102 to verify my identity and personal information above in order to determine driver eligibility as outlined on Capital Dream Cars's website (Self-Drive Policies). I understand that Capital Dream Cars may learn information bearing upon my credit standing, character, general reputation, personal characteristics, or mode of living and may be derived from credit bureaus, departments of motor vehicles, court records, or any other source needed to verify the information I have voluntarily provided above. I understand that I may request a complete and accurate disclosure of the investigative findings as they relate to my character, general reputation, personal characteristics, or mode of living.

**RESERVATION:** Vehicle:  Ferrari 360 Spider  Bentley Continental GT  
 (Booking NOT final until confirmed by Capital Dream Cars)  Lamborghini Gallardo  Aston Martin V8 Vantage Roadster

Location:  Pickup  Delivery to: \_\_\_\_\_

Start Date/Time: \_\_\_\_\_ DAY, \_\_\_\_\_ / \_\_\_\_\_ / 20\_\_ at \_\_\_\_\_ AM / PM

End Date/Time: \_\_\_\_\_ DAY, \_\_\_\_\_ / \_\_\_\_\_ / 20\_\_ at \_\_\_\_\_ AM / PM

**PAYMENT:** I authorize Capital Dream Cars to use the following credit/debit card as payment for rental deposit/fees, refundable security deposit, and associated rental fees. Capital Dream Cars will invoice separately and charge the credit card provided below at the time of reservation confirmation:

Circle One: Visa / MC / AmEx \_\_\_\_\_  
 Printed Name on Card \_\_\_\_\_ Credit Card No. \_\_\_\_\_

Exp. Date \_\_\_\_\_ Sec. Code\* \_\_\_\_\_ Cust. Serv. Phone \_\_\_\_\_ Signature \_\_\_\_\_ Date (MM/DD/YYYY) \_\_\_\_\_

\*On Visa and MasterCard cards, the Security Code is the last 3-digit number found on the card back. On American Express cards, the Security Code is the non-embossed 4-digit number found on the card front and usually above and right of the card number.

**I have read, understand, and accept Capital Dream Cars's Rental, Reservation and Privacy Policies as outlined on its website. I affirm I have had the opportunity to ask questions about this form and that all such questions have been answered to my satisfaction. I execute this document knowingly and voluntarily. By signing below, I agree to all terms outlined above.**

**FAX FORM TO: 703-783-7575**

Signature \_\_\_\_\_ Date (MM/DD/YYYY) \_\_\_\_\_