## **Customer Sign-In Sheet**

NAME:	DATE:
ADDRESS:	
HOW WOULD YOU LIKE FOR US TO CONTACT YOU Phone, email or texting? <i>Please circle one</i> .	J: Home Phone, Work Phone, Ce
PHONE NUMBER: HOME:WORK:	
If you would like text messages, please list provider	
EMAIL ADDRESS:	
YEAR/TYPE OF CAR:	
INSURANCE COMPANY:	
WILL YOU REQUIRE THE USE OF A RENTAL VEHIC	CLE Y/N
HOW DID YOU FIND OUT ABOUT US?	
COMMENTS:	