



Transportation Services Agreement

www.dreamdollzservices.com

This is a general policy agreement between you the rider(s) and Dream Dollz Services for transportation services provided.

First Name

Last Name

Primary Phone Number

Email Address

Date of Birth

- I contest that I will be transported to a capable adult 18 years old or older upon drop off from surgery.
- I confirm that I specifically contracted Dream Dollz Services,LLC.
- I acknowledge that the driver will assist me in/ out the vehicle only and is unable to assist me into my dwelling. I will have a capable adult companion assist me once I'm out of the vehicle.
- I acknowledge if traveling alone and book transportation services. Services will be canceled immediately and deposit forfeited.

Acceptance and Agreement

I confirm that I specifically contracted Dream Dollz Services,LLC for day of surgery transportation services ONLY from surgery center to hotel/ Airbnb location. The undersigned below denotes acceptance and agreement for the services provided by Dream Dollz Services,LLC only. Therefore relinquishes any liability or responsibility medically or otherwise with the acceptance of transportation. In the event of an emergency Dream Dollz Services,LLC agrees to contact emergency services via 911.

By signing below, I am acknowledging that I have read, understand and will comply with the above mentioned

Drivers or State ID No.

Surgery Center Name

hotel/ Airbnb location

Signature

Date