

## **Airport Transfer Form**

## PLEASE TYPE OR PRINT ON THIS FORM

Our transfer service will greet you in the Baggage Claim area of the Asheville Regional Airport (AVL) with a sign that reads "Cucurbitaceae and/or your Last Name." This service is provided at a rate of \$35 per-person one way, or \$70 round-trip, and includes driver gratuity. Airport Transfers are due 7 days in advance of your arrival. If your flight information changes at the last moment, please call our airport dispatcher at 828-251-9013, or 828-258-2526 after office hours.

Name(s):			
Address:			
City:	State:	Country:	Zip/Postal Code:
Phone:	Cell Phone:_		Fax:
E-Mail:			
Name of Hotel:		Nun	nber in Party:# Sets of Golf Clubs:
Any changes in your flight plans	s should be faxed or phon	ed in to our office.	
Arrival:			
Dateat_	AM/PM	Airline	#
Flight Departure Time:			
Dateat	AM/PM	Airline	#
***RESEI	RVATIONS CANNOT BE MA	ADE WITHOUT COMF	PLETE FLIGHT INFORMATION***
American Express, MasterCard	or Visa Only		
☐ AMEX ☐ MC ☐ VISA	CARD #		Exp. Date
Card Security Code: The Card Security Code (CSC) is when you use your card over the			side of your credit card. It provides added security f, not on receipts or statements.
Signature of Cardholder:	lly refundable with 48 hou	rs notice, otherwise d	charges will be submitted).

Please mail or fax form to:

**Accents on Asheville** 

290 Macon Avenue

Asheville, NC 28804 800-627-1185 (within USA)

828-251-9013 (outside USA)

Fax: 828-251-9213

Accents on Asheville

Register online: www.accentsonashville.com

key code: cuke