

## Partner Registration Form



**ScooToGo.Com**

Scooter Direct Inc.  
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Odessa, FL 33556

Toll Free **1-800- 820-3576**

Ph : **(727) 816-9772**

Fas: **(727) 816-9773**

### Reservation Partner Details

Reservation partner Name*	<input type="text"/>
Company Address*	<input type="text"/>
City/County*	<input type="text"/>
State(if Applicable)	<input type="text"/>
Zip*	<input type="text"/>
Country*	<input type="text"/>
Type of Organization	<input type="text"/>
Primary Contact Details	<input type="text"/>
First Name*	<input type="text"/>
Last Name*	<input type="text"/>
Daytime Telephone*	<input type="text"/>
Fax*	<input type="text"/>
Cell/Mobile Phone	<input type="text"/>
Agency Reference (if Applicable)	<input type="text"/>
Email Address (Please enter twice for Confirm)*	<input type="text"/>
	<input type="text"/>

As a Scootogo.com Reservation Partner, please be aware that no reservation is confirmed until we issue you a confirmation email. Within one business day you will receive an email confirming the details of your client's rental and which will include two versions of our standard Rental Agreement and Waiver of Liability and Hold Harmless Agreement: one that you can send to your client that he or she can accept by emailing us at [Reservation@scootogo.com](mailto:Reservation@scootogo.com) and another with a signature line that you may have your client sign and fax to us at 1 (727) 816-9772

Or, if you'd prefer, we'll make things even easier for you! When you rent a Scootogo.com scooter or mobility equipment for your client we'll give you the option for us to contact your client for you. Simply provide us with his or her email address and we'll email the Rental Agreement and Waiver of Liability and Hold Harmless Agreement directly. And, if we haven't received the executed agreement within 48 hours of the time of rental, we'll send both you and your client a friendly reminder, so there won't be any issues or delay once your client arrives.

I have fully read and agree to the Scootogo.com Reservation Partner Terms and conditions

Full Name (Printed) : \_\_\_\_\_

Signature : \_\_\_\_\_

Date : \_\_\_\_\_