Please complete the following information. Send completed form, proof of insurance and payment to: ISTA – Cart Rental, PO Box 87, Clear Lake, IA 50428. Confirmation of your rental will only be sent via email. Reservations by phone are NOT permitted. There are a limited number of carts available – first come, first served – no holds.

Name:			
Address:			
Email:	il: Telephone:		e:
Age:	Driver's License #:		State:
Lease start date:	Re	eturn date:	
COST:			
\$38 per day plus tax	and \$10 cart permit fee		
# of days X \$3	38 = x 1.07 =_		_ Rental Amount
		+ \$10.00	_ Cart Permit
			Total Due
include \$500,000, combine By renting this cart, I ackno	a valid driver's license to rent and ed single limits for Bodily Injury ar owledge I am responsible for any for any damages in full and retur	nd Property Damage and all damages to tl	ne cart incurred while it is in my
Signature:			