



CONTRACTED SUPPLIER

# Premier Purchasing Hertz Rental Program member enrollment form

CONTRACTOR: The Hertz Corporation  
CONTRACT NUMBER: PP-SV-168  
SERVICE CATEGORY: Car Rental Services

To enroll in the Premier Purchasing Hertz Rental Program:

An authorized representative for each member organization must read and complete this enrollment form. Upon receipt of the completed form, Hertz will assign a Premier Purchasing Corporate Discount Program ID (CDP-ID) number for the Member organization to distribute to their employees. **\*\*INDIVIDUAL EMPLOYEES ARE NOT AUTHORIZED TO APPLY\*\***

## Premier Purchasing Member Information

PREMIER MEMBERSHIP NUMBER\* \_\_\_\_\_ PREMIER MEMBER GLN NUMBER\* \_\_\_\_\_

MEMBER ORGANIZATION NAME\* \_\_\_\_\_

ADDRESS\* (MAIN CORPORATE OFFICE) \_\_\_\_\_ SUITE / P.O. BOX\* \_\_\_\_\_

CITY\* \_\_\_\_\_ STATE\* \_\_\_\_\_ ZIP CODE\* \_\_\_\_\_

CONTACT NAME\* \_\_\_\_\_ CONTACT TITLE\* \_\_\_\_\_

CONTACT ADDRESS (If different from main corporate office) \_\_\_\_\_ SUITE / P.O. BOX \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

CONTACT PHONE\* \_\_\_\_\_ CONTACT FAX \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

Rental transactions per month:\*

1-100      101-500      501-1000      1000 or more

Is your annual rental car spend in excess of \$15k per year?\*      Yes      No      \_\_\_\_\_

\*If yes, please specify amount

Asterisk (\*\*\*) indicates information is required.

For questions or assistance on submitting this form please contact [CorporateCustomerService@Hertz.com](mailto:CorporateCustomerService@Hertz.com). Please send completed enrollment forms to [CorporateCustomerService@Hertz.com](mailto:CorporateCustomerService@Hertz.com).