

NAME			PLEASE PRINT OR TYPE		
Last _____	First _____	Middle Initial _____			
Title _____	E-mail _____				

BUSINESS INFORMATION					
Billing Information			Delivery Information		
Company Name _____			Company Name _____		
Department _____			Department _____		
Street Address _____			Street Address _____		
City, State Zip _____			City, State Zip _____		
Phone Number _____			Phone Number _____		
Fax Number _____			Fax Number _____		
Cost Code / Account # _____			Phone # of Travel Arranger _____		
Travel Arranger/Assistant _____			Email of Travel Arranger _____		
Charge Airline / Rail Tickets To: Type _____ #: _____			Expiration Date _____		
Hotel Guarantee Credit Card #: Type _____ #: _____			Expiration Date _____		

TRAVELER INFORMATION					
CAR RENTAL			HOTEL		
Club Membership(s) _____			Club Membership(s) _____		
Car Co. _____	ID # _____		Hotel _____	ID# _____	
Car Co. _____	ID # _____		Hotel _____	ID# _____	
Car Co. _____	ID # _____		Hotel _____	ID# _____	
Car Co. _____	ID # _____		Hotel _____	ID# _____	
Special Preference	<input type="checkbox"/> Smoking	<input type="checkbox"/> Non Smoking	Special Preference	<input type="checkbox"/> Smoking	<input type="checkbox"/> Non Smoking
Car Size	<input type="checkbox"/> Compact	<input type="checkbox"/> Mid-Size	<input type="checkbox"/> Full-Size	Room Type	<input type="checkbox"/> Double <input type="checkbox"/> Queen <input type="checkbox"/> King
Special Requests			Special Requests		
AIRLINE Electronic Ticketing	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Other _____		
Seating Preference	<input type="checkbox"/> Aisle	<input type="checkbox"/> Window	_____		
Alternative Choice	<input type="checkbox"/> Aisle	<input type="checkbox"/> Window	_____		
Special Meal Request (Specify) _____			Medical Alerts (Specify) _____		

Frequent Flyer Club Memberships				Passport Information	
Airline _____	Status _____	ID # _____		Do you have a passport	<input type="checkbox"/> YES <input type="checkbox"/> NO
Airline _____	Status _____	ID # _____		Country of Citizenship	_____
Airline _____	Status _____	ID # _____		Passport Number	_____
Airline _____	Status _____	ID # _____		Issue Date	_____
Airline _____	Status _____	ID # _____		Expiration Date	_____

PERSONAL INFORMATION			
Home Address _____	Home Phone Number _____		
City, State Zip _____	_____		
Credit Card: Type _____ #: _____	Expiration Date _____		

AUTHORIZATION	
<p>The undersigned traveler and the Company hereby authorizes Advantage Travel, Inc. to charge to the Card Account (through signature on file) as indicated on this form, any business travel transactions requested by the undersigning traveler or his authorized agent via telephone or letter while the account is in effect. The individual traveler hereby authorizes Advantage Travel, Inc. to charge the personal Card Account (through signature file) as indicated on this form, any personal travel transactions requested by him/her or his/her authorized agent via telephone or letter.</p>	
X	DATE
SIGNATURE OF TRAVELER	DATE
X	DATE
SIGNATURE OF AUTHORIZED COMPANY AGENT	DATE