



☐ New ☐ Update

Travel Advisor _____

So we may better serve your travel needs, please complete and return to your Travel Edge Travel Advisor email.

In an effort to minimize travel complications, please make sure your PROFILE NAME matches your LEGAL IDENTIFICATION.

Personal Information

If more space is needed, check here and use reverse supplemental page ☐

FULL Legal Name		Home Address			
Title		City, State, Zip			
Bus. Address		Alt Email Address			
City, State, Zip		Home Phone		Mobile Phone	
Business Phone		Emergency Contact		Contact Phone	
Email Address		Passport Information			
Travel Arranger		Country		Number	
Arranger Email		Date of:	Issue	Expiration	
Arranger Phone		Fax		Legal Name (on passport)	
Date of Birth		Gender:	Male	Female	

Airline Information

If more space is needed, check here and use reverse supplemental page ☐

Airline	Freq. Flyer Number	Preferred Airline?	Frequent Flyer Level		
American		<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Gold	<input type="checkbox"/> Platinum	<input type="checkbox"/> Exec. Plat.
Delta		<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Silver	<input type="checkbox"/> Gold	<input type="checkbox"/> Platinum
United		<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Premier	<input type="checkbox"/> Prem. Exec.	<input type="checkbox"/> IK
Continental		<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Silver	<input type="checkbox"/> Gold	<input type="checkbox"/> Platinum
		<input type="checkbox"/> yes <input type="checkbox"/> no			
		<input type="checkbox"/> yes <input type="checkbox"/> no			
		<input type="checkbox"/> yes <input type="checkbox"/> no			
		<input type="checkbox"/> yes <input type="checkbox"/> no			
		<input type="checkbox"/> yes <input type="checkbox"/> no			
Special Meal Requests:		Other Special Requests:			

Travel Preferences (Please check all that apply within your company's travel policy)

Class of Service				Seating Preferences	
Domestic:	<input type="checkbox"/> First	<input type="checkbox"/> Business	<input type="checkbox"/> Coach	Window: <input type="checkbox"/>	Aisle: <input type="checkbox"/>
International:	<input type="checkbox"/> First	<input type="checkbox"/> Business	<input type="checkbox"/> Coach	Exit Row: <input type="checkbox"/>	Bulkhead: <input type="checkbox"/>

Car and Hotel Information

If more space is needed, check here and use reverse supplemental page ☐

Hotel Preferences <input type="checkbox"/> Smoking <input type="checkbox"/> Non-Smoking			Car Rental Preferences		
Hotel	Rewards Program	Rewards Number	Company	Rewards Program	Rewards Number
Special Hotel Requests:			Size of Car:	<input type="checkbox"/> Sub-Compact	<input type="checkbox"/> Compact
			<input type="checkbox"/> Mid-size	<input type="checkbox"/> Full Size	<input type="checkbox"/> SUV

Credit Card Information

Airline Tickets			Hotel Guarantee		
Card Name	Account #	Exp. (Mo/Yr)	Card Name	Account #	Exp. (Mo/Yr)
Card Holder's Name			Card Holder's Name		
Signature:	<input type="checkbox"/> Electronic signature submitted via email		Date: _____	I authorize the use the above credit card(s) for hotel guarantee and/or business travel arrangements.	