



TRAVEL PROFILE

*The information below is required by the TSA Secure Flight Program and will be kept on confidential file. Please fill out accurately and legibly. Thanks!

PRINT FULL NAME: exactly as it appears on your government issued ID

FIRST:

MIDDLE:

LAST:

DATE OF BIRTH (Month / Day / Year): (____ / ____ / ____)

GENDER (as it appears on your gov't issued docs): **FEMALE** **MALE**

CELL PHONE: _____

EMAIL ADDRESS: _____

PREFERRED ORIGIN CITY DEP/ARR: _____

TRAVEL PREFERENCES:

AIRLINE SEAT PREFERENCE (Circle One): **AISLE** **CENTER** **WINDOW**

*PLEASE NOTE: seat preferences can be requested but are not guaranteed.

KNOWN TRAVELER NUMBER (KTN): _____

AIRLINE FREQUENT FLYER INFORMATION: please list airline and associated mileage number to be created for any flights. Company is responsible for taking the most cost effective routing and will not select flights based on personal mileage acquisition. Company can not be held responsible for reconciliation of credits of travel mileage number not applied before travel:

ALASKA:

AMERICAN:

DELTA:

UNITED:

JETBLUE:

VIRGIN:

SOUTHWEST:

HAWAIIAN:
