## Chambers Travel Profile

## *Legal* Name:       Date of Birth:

Title:

Company:  PS  I  E  FSS

Business Phone & Ext:

Home Phone:       Cell Phone:

Email Address:

Discount (i.e., AAA, AARP):

Credit Card Number w/Expire Date:

Card Holders Name:

Credit card is for hotel guarantee only – Chambers never charges your credit card for anything.

Seating Choice:  Aisle  Window

Will you fly commuter airlines:  Yes  No  If necessary

Special Meals/Needs:

**Airline Frequent Flyer Number & Status (e.g., Gold, Elite)**

Delta:

American:

Midwest:

United:

Us air:

Southwest:

Continental:

Other:

**Hotel Preference:**  Smoking  Non-smoking

List Frequent Traveler Numbers: (e.g., Holiday Inn Priority)

**Car Rental ID Numbers:** (e.g., Hertz #1)

**International Travel Information**

Passport Issued In What Country:

Passport Number:

Passport Expy Date:

Traveler Nationality:

I authorize Foth to release my personal information above to Chambers Travel for use when making arrangements for travel and/or travel insurance.

Member Signature Date

**Fax to 920-496-9599 or Email to:** [**cindy@chamberstravel.net**](mailto:cindy@chamberstravel.net)