



To Best Serve You, Please Help Us Update Your Passenger Information.
 Information will be kept confidential, of course.

PASSENGER PROFILE – LETTER OF AUTHORIZATION

Please Print

Passenger Legal Name(s) _____ DOB _____
 Spouse/Companion: _____ DOB _____
 Children (name(s) & (DOB): _____
 Home Address: _____
 City/ State/ Zip _____
 Home Phone: _____ Home Fax: _____
 Email Address: (specify home/business) _____
 Business Name: _____ Title: _____
 Business Address: _____
 Business Phone: _____ Business Fax: _____

Preferred Carrier: _____ Frequent Flyer # _____
 Best Available Price:(any carrier, please check here) _____
 1st choice: _____ FF# _____
 2nd choice: _____ FF# _____

<u>Class of Service</u>	<u>Seating Preference</u>	<u>Special Requests</u>
First Class _____	Aisle _____	Special Diet _____
Business _____	Window _____	Special Needs _____
Economy _____	No Preference _____	Other _____

Rental Car Company _____ Car Size _____ Circle one or all (AAA, Costco, AARP, other)
 Best Price: _____

Hotel Preference _____ Bed Size _____ Circle one or all (AAA, Costco, AARP)
 Best Price: _____
 Special Choice: _____
 Smoking Room: _____ Non-Smoking Room: _____

Cruise Preference _____ Single/DD _____ I / we are Alumnae of ?? (Cruise Line(s):
 Inside cabin _____
 Ocean View _____
 Suite w/balcony _____
 Best Avail. Price _____

PAYMENT INFORMATION

Client usually pays by: (circle one or all) Cash Check Credit Card
Credit card type _____ Account # _____ Exp. Date _____ Name on Card _____

I hereby authorize Sweet Adeline's Travel & Tours to charge airline tickets and/or travel services to the above credit cards upon my request to do so.

Signature _____ Date _____
 Spouse (if applicable) _____ Date _____

** Please complete form, then Fax or Mail ASAP to:
 Sweet Adeline's Travel & Tours, Inc. 17119 Horace St. Granada Hills, CA 91344
 Phone: 818 368-6545 Fax: 888 493-5336 Email: SweetAdeline@att.net
 www.sweetadelinetravel.com Thank You !!