



# CORPORATE TRAVEL PROFILE

Please send ORIGINAL to YYZ TRAVEL GROUP. Retain a copy for your file.

## PERSONAL INFORMATION

NAME	PREREFFED DEPT. AIRPORT:
(PLEASE PRINT YOUR NAME EXACTLY AS IT APPEARS ON YOUR TRAVEL DOCUMENTS)	
HOME PHONE:	HOME FAX:
MOBILE PHONE:	PAGER #:
HOME ADDRESS:	
CITY:	PROVINCE/STATE:
COUNTRY:	POSTAL CODE:
ARE YOU A SENIOR CITIZEN (AGE 62 OR OLDER?) <input type="checkbox"/> YES <input type="checkbox"/> NO (for discount purposes)	

## COMPANY INFORMATION

COMPANY NAME:	TITLE:	
ADDRESS:		
CITY:	PROVINCE:	POSTAL CODE:
BUSINESS PHONE:	BUSINESS FAX:	
ASSISTANT'S NAME:	ASSISTANT'S PHONE:	
E-MAIL ADDRESS:		
DEPARTMENT:	COST CENTRE:	

## CREDIT CARD INFORMATION

<i>All BUSINESS tickets should be charged to the following credit card:</i>		
CARD TYPE:	ACCOUNT #:	EXP. DATE
<i>All HOTELS should be charged to the following credit card:</i>		
CARD TYPE:	ACCOUNT #:	EXP. DATE
<i>All PERSONAL travel should be charged to the following credit card:</i>		
CARD TYPE:	ACCOUNT #:	EXP. DATE
MY SIGNATURE BELOW AUTHORISES CHARGES TO MY CREDIT CARD(S) FOR REQUESTED TRAVEL:		
SIGNATURE:	DATE:	



### AIRLINE INFORMATION

FREQUENT FLYER NUMBERS:

AIRLINE: ACCOUNT NUMBER:

AIRLINE: ACCOUNT NUMBER:

AIRLINE: ACCOUNT NUMBER:

AIRLINE: ACCOUNT NUMBER:

SEATING:  WINDOW  AISLE  OTHER

MEALS:  LOW SODIUM  VEGETARIAN  LOW CALORIE  KOSHER  OTHER

### CAR RENTAL INFORMATION

PREFERRED CAR RENTAL VENDORS:

RENTAL COMPANY: ACCOUNT NUMBER:

RENTAL COMPANY: ACCOUNT NUMBER:

RENTAL COMPANY: ACCOUNT NUMBER:

RENTAL COMPANY: ACCOUNT NUMBER:

PREFERRED SIZE:  ECONOMY  COMPACT  MID SIZE  FULL SIZE  OTHER

2-DOOR  4-DOOR

### HOTEL INFORMATION

HOTEL CHAINS – please list in order of preference: FREQUENT GUEST MEMBERSHIP NUMBER:

1.

2.

3.

4.

ROOM TYPE PREFERRED:  DOUBLE  QUEEN  KING  JUNIOR

SMOKING  NON-SMOKING  OTHER



PASSPORT / VISA INFORMATION			
PASSPORT #:	NAME AS IT APPEARS ON PASSPORT:		
DATE OF BIRTH:	COUNTRY OF ISSUE:	EXP. DATE:	GENDER:
VISAS:	COUNTRY:	DATE ISSUED:	EXP. DATE:
VISAS:	COUNTRY:	DATE ISSUED:	EXP. DATE:
VISAS:	COUNTRY:	DATE ISSUED:	EXP. DATE:
VISAS:	COUNTRY:	DATE ISSUED:	EXP. DATE:

ADDITIONAL INFORMATION	
EMERGENCY CONTACT:	
RELATIONSHIP:	
PHONE:	
Please note any additional information we should be aware of regarding your travel arrangements:	
PLEASE PRINT YOUR NAME/COMPANY NAME:	DATE:

