

River City Travel

Passenger Information and Registration Form Group / Meeting / Corporate Incentive Travel

1) Please type the names of all travelers:

(Names MUST correspond to how they appear on the passport and photo ID. Note: Passport # is optional)

Company Name:		Event Name:	
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Last Name:		First Name:		Date of Birth
Passport Number:				Exp. Date:
Place of Issuance:				

Last Name:		First Name:		Date of Birth
Passport Number:				Exp. Date:
Place of Issuance:				

2) Please type in your Departure and Return City:

Traveler:	
Departure Date:	Departure Airport City:
Return Date:	Return Airport City:
Guest of Traveler:	
Departure Date:	Departure Airport City:
Return Date:	Return Airport City:

3) Please type in your complete mailing address, phone numbers, and e-mail address:

Address:		
City:	St/Province:	Postal Code:
Phone:	Mobile:	Country:
Email:	Alt. Email:	
Emergency Contact Name:	Emergency Contact Phone:	

4) Miscellaneous information and special requests:

Preferred airline:	Room requests:
Preferred seats: Window or Aisle	Smoking, Non smoking
Frequent Flyer numbers:	1 king or 2 double beds
Special diet / meal requirements:	
Special service requests: Wheel chair service, Language assistance	

5) Credit Card information:

Credit Card #:	Exp Date: /	CVN:
Billing Address:		
Name as it appears on the Credit Card:		

Authorized Signature: _____ Date: _____

This form must be **completed, signed, printed and faxed** to
(503) 335-3352 Attn: Kerrie Morrow or **emailed** to Kerrie@travelpdx.com
before Jan 1, 2009.

IMPORTANT! River City Travel will email your itineraries for final approval before issuing air tickets. You **MUST** advise us within **24 hours** to complete your reservation.