



**PERSONAL TRAVEL PROFILE**



Fax to Anita at: 509-327-9647

**PERSONAL INFORMATION**

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_  
COMPANY: \_\_\_\_\_ DEPARTMENT: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ ST: \_\_\_\_\_ ZIP: \_\_\_\_\_  
CELL PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_  
HOME PHONE: \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_  
SECRETARY: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_  
CREDIT CARD: \_\_\_\_\_ EXP DATE: \_\_\_\_\_

**AIRLINE INFORMATION**

PREFERRED CARRIERS: \_\_\_\_\_  
SEAT PREFERENCE: AISLE \_\_\_\_\_ WINDOW \_\_\_\_\_ OTHER \_\_\_\_\_  
SPECIAL MEALS: \_\_\_\_\_  
FREQUENT FLYER NUMBERS: \_\_\_\_\_

**CAR PREFERENCE**

COMPACT \_\_\_\_\_ MIDSIZE \_\_\_\_\_ FULLSIZE \_\_\_\_\_ LUXURY \_\_\_\_\_ OTHER \_\_\_\_\_  
CORPORATE NUMBERS: \_\_\_\_\_  
FREQUENT RENTER NUMBERS: \_\_\_\_\_

**HOTEL INFORMATION**

PREFERENCES: \_\_\_\_\_  
SMOKING ROOM (Y/N): \_\_\_\_\_ SPECIAL REQUESTS: \_\_\_\_\_  
CORPORATE NUMBERS: \_\_\_\_\_  
OTHER INFORMATION: \_\_\_\_\_  
CREDIT CARD AUTHORIZATION SIGNATURE: \_\_\_\_\_