

Good News Tour & Travel, Inc.

AIRLINE NAME LIST

DUE 60-90 days prior to departure

DESTINATION _____

SCHOOL _____

DEPARTURE DATE _____

AIRLINE _____

In order to expedite check-in and allow us to prepare in advance for your group's flight, please complete the following information: In Alphabetical order, use *formal full names only*. (Use name on certified birth certificate, drivers' license or other identification.) Attach this word document in an e-mail and return it to: travel@goodnewstt.com. Please call us toll free if you need assistance in attaching a word document 1-866-487-0661

Any changes/additions to this list, once sent to obtain tickets, will result in an additional charge based on the airline. (Generally \$50.00)

	Last Name (alphabetically)	First Name	Middle Initial	Student, Chaperone, Director, Escort	Office use only
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
29					
30					
31					
32					
33					
34					
35					

AIRLINE LIST – Page # 2

SCHOOL: _____

	Last Name (alphabetically)	First Name	Middle Initial	Student, Chaperone, Director, Escort	Office use only
36					
37					
38					
39					
40					
41					
42					
43					
44					
45					
46					
47					
48					
49					
50					
51					
52					
53					
54					
55					
56					
57					
58					
59					
60					
61					
62					
63					
64					
65					
66					
67					
68					
69					
70					
71					
72					
73					
74					
75					
76					
77					
78					