

DUE DATE 60-90 days prior to departure SCHOOL NAME AND DESTINATION AIRLINE AND DEPARTURE DATE

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 <u>formal full names only</u>. (Use name on certified birth certificate, drivers' license or other identification.) Attach this document to an e-mail and return it to: <u>jana@gntt.travel</u>. If you need assistance call 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 | Male or Female | Date of Birth | Student, Chaperone, Director, Escort | Office use only |
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