



Necessary Client Information Form

CLIENT INFORMATION

Name (As It Reads On Passport) *PLEASE INCLUDE COPY OR PHOTO OF YOUR PASSPORT WHEN RETURNING THIS FORM*

First name:

Middle name:

Last name:

Cell Phone Number:

E-mail:

Mailing address:

DOB/Gender:

Passport #/Country of Issue:

Passport Issue Date:

Passport Expiration Date:

FLIGHT INFORMATION:

Airline Preference & Mileage #:

Global Entry or TSA PreCheck #:

Please select preferred flight class:

Please select preferred flight seating:

HOTEL INFORMATION:

Number of beds/sizes:

Room Category:

Additional Notes (i.e. car rental/hotel membership numbers, beds/bedding, dietary requests, wheelchair assistance, etc):

Please complete a separate form for each additional traveler

Willamette International Travel
1314 NW Irving St, Unit 101 Portland, OR 97209 Phone:

503.224.0180

Office hours: Monday-Friday, 830a-5p