

Please fill out and fax, mail or email

\* Denotes required field

7931 NE Halsey St #309

Portland, OR 97213

503.231.1600

Fax: 503.235.2338

contact@wtpdx.com



(First, Middle, Last)

\* Name:

Email:

Cell:

Company:

Business Phone:

Address:

Fax:

\* D.O.B.

\* Gender:

Country:

Expiration Date:

Passport #:

Known Traveler #:

**TRAVEL PREFERENCE**

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Seating:            Aisle            Window

Special meal or other requests:

**AIRLINE FREQUENT FLYER PROGRAM/S IN ORDER OF PREFERENCE**

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*Frequent Flier Number:*

*Current Status:*

1.

2.

3.

**PREFERRED CAR RENTAL COMPANY**

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*Account Number:*

1.

2.

Size/Model Preference:

**PREFERRED HOTELS**

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*Frequent Guest/Corporate Number:*

1.

2.

Bed Configuration:

Smoking

Non-Smoking

AAA Member     Yes     No

Other Discount Program:

**CREDIT CARD**

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Name:

CW:

Card #

Exp: