



# TRAVEL REQUEST FORM

This form may be completed electronically & attached to an e-mail message.  
If it is to be completed by hand, please write legibly.

## TRAVELER INFORMATION

Company Name \_\_\_\_\_ Traveler Name \_\_\_\_\_  
Traveler Home Tel # \_\_\_\_\_ Traveler Cell # \_\_\_\_\_ Traveler EMail \_\_\_\_\_  
Travel Arranger Name \_\_\_\_\_ Tel # \_\_\_\_\_ EMail \_\_\_\_\_  
Traveler Profile On File with Travelex?  Yes  No – Please complete Traveler Profile online before sending this form

## AIR RESERVATION REQUEST

Air  Car  Hotel  One Way  Round-Trip  Multiple Cities

Comments \_\_\_\_\_

Date	Fly From	To	Depart	Arrive	Preferred Airline
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Frequent Flyer #s \_\_\_\_\_ Seat Preference  Aisle  Window

## CAR RESERVATION REQUEST

Pre. Car Vendor \_\_\_\_\_ Car Type/Size \_\_\_\_\_ Frequent Flyer# \_\_\_\_\_

Comments \_\_\_\_\_

Pick-Up Date	P/U Location	P/U Time	Drop Off Date	Drop Off Time	Drop Off Location
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

## HOTEL RESERVATION REQUEST

Hotel Room Type (check all that apply)  Smoking  Non-Smoking  King  Double

Comments \_\_\_\_\_

Hotel Chain/Name	City/Location	ST	Check-In Date	Check-Out Date
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Frequent Guest # \_\_\_\_\_

## PAYMENT INFORMATION/APPROVAL

Credit Card Type) \_\_\_\_\_ Card # \_\_\_\_\_ Expires \_\_\_\_\_

Payment Authorization Signature \_\_\_\_\_ Date Completed \_\_\_\_\_

Comments \_\_\_\_\_

Your tentative itinerary will be e-mailed to you from Virtually There for your approval. Please email approval back within 24 hours  
**Please note that airline fares are not guaranteed until tickets are issued.**

Please complete form and fax or email to Jennifer at:  
jenniferb@travelexonline.com ♦ Fax# 847-882-1212 ♦ Tel # 847-882-0400