



The Travel House Inc.

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CLIENT PROFILE

LAST NAME:..... FIRST NAMES:.....

DATE OF BIRTH:.....SEX: (F)..... (M).....

PLACE OF BIRTH:.....NATIONALITY:.....

HOME ADDRESS:

.....

TEL. NO:.....FAX.NO:.....EMAIL:.....

OCCUPATION:.....

NAME OF COMPANY:.....

ADDRESS:.....

.....

TEL. NO:.....FAX. NO:.....EMAIL:.....

PASSPORT NO.....DATE OF ISSUE:.....

PLACE OF ISSUE:.....EXPIRY DATE:.....

USA VISA: PLACE OF ISSUE:.....DATE:.....EXPIRY DATE:.....

VISA #:

SEATING: WINDOW: AISLE: OTHER:

AIRLINE ADVANTAGE NUMBERS:

1..... 2.....

3..... 4.....

MEAL PREFERENCE:.....

CAR PREFERENCE:.....

HOTEL PREFERENCE:.....

CREDIT CARD INFORMATION:.....

SPECIAL REMARKS:.....