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Admiral Travel, Inc.

A World of Experience...

Admiral Travel's Traveler Profile

So that we can assist you in a more professional manner, please take the time to fill out the form below.

All information is kept strictly confidential !

Thank you, and we look forward to assisting you with all your travel arrangements.

General Information

Date:

Name:	
Title/Dept:	
Company:	
Company Address:	
Company City:	
Company State:	
Company Zip:	
Business Phone:	
Business E-Mail:	
Home Address:	
Home City:	
Home State:	
Home Zip:	
Home Phone:	
Home E-Mail:	

Air Travel Preferences

Airline 1:		Frequent Flier Number:		Name on card:	
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Airline 2:		Frequent Flier Number:		Name on card:	
Airline 3:		Frequent Flier Number:		Name on card:	
Airline 4:		Frequent Flier Number:		Name on card:	
Airline 5:		Frequent Flier Number:		Name on card:	
Airline 6:		Frequent Flier Number:		Name on card:	
Class:	<input type="checkbox"/> First <input type="checkbox"/> Business <input type="checkbox"/> Coach				
Seating Preferences:	<input type="checkbox"/> Aisle <input type="checkbox"/> Window <input type="checkbox"/> Forward <input type="checkbox"/> Rear <input type="checkbox"/> Bulkhead <input type="checkbox"/> Smoking				
Meal Preferences:	<input type="checkbox"/> Diabetic <input type="checkbox"/> Vegetarian <input type="checkbox"/> Kosher <input type="checkbox"/> Other: <input type="text"/>				

Hotel Information

Hotel 1:		Frequent Guest Number:	
Hotel 2:		Frequent Guest Number:	
Hotel 3:		Frequent Guest Number:	
Hotel 4:		Frequent Guest Number:	
Hotel 5:		Frequent Guest Number:	
Hotel 6:		Frequent Guest Number:	
Preferences:	<input type="checkbox"/> Please Select	<input type="checkbox"/> Non-Smoking	<input type="checkbox"/> Smoking

Car Rental

Rental Company 1:		Frequent Renter Number:	
Rental Company 2:		Frequent Renter Number:	
Rental Company 3:		Frequent Renter Number:	
Rental Company 4:		Frequent Renter Number:	
Rental Company 5:		Frequent Renter Number:	
Rental Company 6:		Frequent Renter Number:	
Car Type Preferences:	Preferred car size: <input type="checkbox"/> Please Select <input type="checkbox"/> Smoking?		

Additional Comments or Other Requests