



# **International Tours<sup>®</sup>**

**YOUR  
TRAVEL MANAGEMENT  
COMPANY**

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***Traveler Profile***

# Traveler Profile

The International Tours agent will enter the information you furnish on this form into the reservation system and retrieve it every time you call for travel reservations. All the data is kept strictly confidential and is accessible only by our agents.

Information included in this profile may change due to transfers, promotions, etc. Changes to the traveler profiles may be handled over the phone, but are not official until a signed change form has been received by International Tours.

## IDENTIFICATION:

Company: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Title: \_\_\_\_\_

Home Telephone #: (\_\_\_\_\_) \_\_\_\_\_ Office Telephone #: (\_\_\_\_\_) \_\_\_\_\_

Statement Information: \_\_\_\_\_

Company Address: \_\_\_\_\_  
Street City State Zip

Delivery Floor/Building: \_\_\_\_\_ Division/Dept.: \_\_\_\_\_

Secretary's Name: \_\_\_\_\_ Home Telephone #: (\_\_\_\_\_) \_\_\_\_\_ Office Telephone #: (\_\_\_\_\_) \_\_\_\_\_

## PERSONS AUTHORIZED TO APPROVE TRAVEL

Name	Position	Phone and Extension
_____/_____/_____	_____/_____/_____	_____/_____/_____
_____/_____/_____	_____/_____/_____	_____/_____/_____
_____/_____/_____	_____/_____/_____	_____/_____/_____

## AIR TRAVEL PREFERENCE:

International Tours will strive to satisfy your requests; however, their efforts are restricted by the selections offered by the various airlines, and time constraints.

Seating: ( )

\_\_\_\_\_ Smoking

\_\_\_\_\_ Window

\_\_\_\_\_ Non-Smoking

\_\_\_\_\_ Aisle

Special Meals: ( )

\_\_\_\_\_ Diabetic

\_\_\_\_\_ Kosher

\_\_\_\_\_ Low-Calorie

\_\_\_\_\_ Vegetarian

\_\_\_\_\_ Low Sodium

\_\_\_\_\_ Other

**Airline Club Memberships and #'s:**

**Airline Frequent Traveler Incentive Plans:**

Club: \_\_\_\_\_ # \_\_\_\_\_ Name of Plan: \_\_\_\_\_ # \_\_\_\_\_

Club: \_\_\_\_\_ # \_\_\_\_\_ Name of Plan: \_\_\_\_\_ # \_\_\_\_\_

Club: \_\_\_\_\_ # \_\_\_\_\_ Name of Plan: \_\_\_\_\_ # \_\_\_\_\_

**AUTOMOBILE RENTAL**

Car Rental Card: (Please indicate your individual ID #, **not** your credit card #)

Hertz Number "1" Club # \_\_\_\_\_

Avis Wizard # \_\_\_\_\_

Budget Super Rez # \_\_\_\_\_

National Green Light # \_\_\_\_\_

Other: \_\_\_\_\_ # \_\_\_\_\_

**Style/Size: ( )**

\_\_\_\_ Compact                      \_\_\_\_ Full Size                      \_\_\_\_ Station Wagon                      \_\_\_\_ 2-Door

\_\_\_\_ Intermediate                      \_\_\_\_ Luxury                      \_\_\_\_ Van                      \_\_\_\_ 4-Door

**HOTEL ACCOMMODATIONS:**

Preferred hotel chain: 1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_

Late Arrival Guaranteed: \_\_\_\_ Yes                      \_\_\_\_ No

Hotel Preference by City:

City:	Hotel:	Corporate Rate # If Applicable:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Room Preference: ( )**

\_\_\_\_ Double Beds                      \_\_\_\_ Suite

\_\_\_\_ Twin Beds                      \_\_\_\_ King Bed

\_\_\_\_ Single Bed                      \_\_\_\_ Other \_\_\_\_\_

