



**WHO 250th Anniversary**  
**Personal Information Form**

**Traveler Information:**

Full legal name **EXACTLY** as it appears on your **PASSPORT** or passport application

Traveler 1: \_\_\_\_\_ Gender  M  F

Date of birth \_\_\_\_\_

Preferred name (to appear on your tour name badge): \_\_\_\_\_

Traveler 2: \_\_\_\_\_ Gender  M  F

Date of birth \_\_\_\_\_

Preferred name (to appear on your tour name badge): \_\_\_\_\_

**Contact Information:**

Home address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home phone \_\_\_\_\_ Cell phone \_\_\_\_\_

Email address \_\_\_\_\_

**Preferences:**

Bedding preference: One (1) king bed  Two (2) queen beds

Seat assignment Preference: Window  Aisle  No Preference

Trip Insurance: Accept  Decline

**Frequent flyer number (optional):**

Traveler 1 Airline \_\_\_\_\_ Membership Number \_\_\_\_\_

Traveler 2 Airline \_\_\_\_\_ Membership Number \_\_\_\_\_

**Known traveler number(s) (optional):**

Traveler 1 TSA Precheck \_\_\_\_\_

Traveler 2 TSA Precheck \_\_\_\_\_

**Dietary or other special needs:** \_\_\_\_\_

\_\_\_\_\_