

TRAVEL INFORMATION FORM

PASSENGER INFORMATION			
Title:			
Full Legal Name as per passpe	ort (First / Middle / L	ast)	
First Name:			
Middle Name: (If applicable) Last Name:			
Date of Birth:	_DAY	MONTH	YEAR
Passport Citizenship: (No need for passport number.)			
Contact Phone Number: (Mobile preferred)			
Contact Email Address: Enter an email address that you che email address provided. Travel Insurance Requested: Note: The Department of Art History	✓ YES		
TRAVEL DETAILS			
Departure Date:		Return Date:	
(Preferred) Departure Airport/Station/City:			
Arrival Airport/Station/City: Note: Arrival is booked for Toronto Pearson International Airport unless a request is made for Billy Bishop Toronto City Airport. If a request is made for the latter, the booking will be dependent on whether the airline services that airport and/or flight availability. Preferred Departure / Arrival Times:			
AM or PM is fine but if you have a			
Seat Preference (aisle/window, front/mid/back):			
Any airline preferences and frequent flyer / traveler numbers:			