



# 2024 ROTARY ADVENTURE IN CITIZENSHIP

Travel Day - SATURDAY, May 25, 2024

## AIR TRAVEL FORM

If your student will be traveling by air through our Central Agent, please complete all information on this form and return it with the STUDENT REGISTRATION FORM to [aicrotaryottawa@gmail.com](mailto:aicrotaryottawa@gmail.com). This information will be forwarded, by us, to our agent Ms. Shannon Vidal with Maritime Travel Ottawa. She will make the reservations on your behalf and forward the ticket via email to the Rotary Club contact indicated on this form. All tickets must be paid by major credit card. Please organize your reimbursement through your Rotary Club. Ticket/credit card charges will not be processed until late April 2024.

### PLEASE PRINT

Please note that the student must present a picture ID at time of check in at the airport.  
(The name on this ID must match the name on the ticket)

Student Name: \_\_\_\_\_  
(First Name) (Last Name) As it appears on your identification

Gender: Male: \_\_\_\_\_ Female: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_  
(Area Code)

Date of Birth: \_\_\_\_\_  
(Day) (Month) (Year)

Mailing Address: \_\_\_\_\_

City/Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Departure Airport: 1<sup>st</sup> Choice: \_\_\_\_\_ 2<sup>nd</sup> Choice: \_\_\_\_\_

Any special requests (i.e. seat preference, desired flights):  
\_\_\_\_\_

### ELECTRONIC TICKET TO BE EMAILED TO:

Rotary Contact: \_\_\_\_\_ Rotary Club of \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### PAYMENT INFO:

Credit Card Number ( for ticket): \_\_\_\_\_ CVD: \_\_\_\_\_ Expiry: \_\_\_\_\_

Name on Credit Card: \_\_\_\_\_

Billing address for this card: \_\_\_\_\_  
(Street Address) (Province) (Postal Code)

Once tickets are issued, they are 100% non refundable and non-transferable. Changes are subject to penalties. Cancellation insurance should be purchased at the time of ticket issuance and is strongly recommended. Please note this insurance covers cancellations for EMERGENCY medical reasons only.

Purchase cancellation insurance (approx. 10% of ticket price) Yes \_\_\_\_\_ No \_\_\_\_\_

Inquiries: Email: [svidal@maritimetravel.ca](mailto:svidal@maritimetravel.ca) Tel: 613-692-2521