



## Client Profile Survey

**NOTE: This is a FILLABLE pdf Document.** To submit this document:

1. Complete the form online. Save it with a different name and email it as an attachment to: [brian@bramaleatravel.com](mailto:brian@bramaleatravel.com) **OR**
2. Complete the form online, Print and Fax it to: 905-792-3059 **OR**
3. Print the form and complete it by hand. Fax it to: 905-792-3059

\* Mandatory Field

<b>*Name</b> as it appears on Passport :			
<b>*Company:</b>			
Title:			
<b>*Phone:</b>			
Cell:			
Admin Contact:			
Home Phone:			
<b>*Email:</b>			
<b>*Date of Birth</b> mm/dd/yyyy :			
Nationality:			
Passport # :			
Inoculations:	Type:	Expiry:	
	Type:	Expiry:	
	Type:	Expiry:	
Airline Preference / Memberships:	Airline:	#:	
	Airline:	#:	
	Airline:	#:	
	Airline:	#:	
Class Preference:	First:	Business:	Economy: No Preference:
Seat Preference:	Window:	Aisle:	No Preference:
Special Meals:			

Preferred Hotel Chain:	1:				#:
	2:				#:
	3:				#:
	4:				#:
Preferred Accommodation:	King:	Queen:	Double:	No Preference:	
	Smoking:		Non-Smoking:		
Car Rental / Preference:	National Emerald #:				
	Avis Wizard Club #:				
	Budget FastBreak #:				
	Other:				
	Economy:	Sub-Compact:	Compact:	Mid-Size:	
	Full Size:	SUV:	Luxury:		
	Other:	No Preference:			
Special Requirements:					
Cost Centre:					
GL:					
<b>*Billing Address:</b>					