



# Vacation



Hotel: \_\_\_\_\_ Confirmation #: \_\_\_\_\_

Tel#: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Dates: \_\_\_\_\_ Rate/Night: \_\_\_\_\_

# Rooms: \_\_\_\_\_ # Days: \_\_\_\_\_ # Nights: \_\_\_\_\_ Rate Includes: \_\_\_\_\_

Late check in time: \_\_\_\_\_ Regular check in time: \_\_\_\_\_

Late check out time: \_\_\_\_\_ Regular check out time: \_\_\_\_\_

Transportation to and from hotel/Tel#: \_\_\_\_\_

Airline: \_\_\_\_\_ Tel#: \_\_\_\_\_

Airline: \_\_\_\_\_ Tel#: \_\_\_\_\_

Airline: \_\_\_\_\_ Tel#: \_\_\_\_\_

## Flight Information:

Date: \_\_\_\_\_

Leaving from: \_\_\_\_\_ Final Destination: \_\_\_\_\_ Connecting in: \_\_\_\_\_

Airline/Flight: \_\_\_\_\_ Departure time: \_\_\_\_\_ Arrival time: \_\_\_\_\_

Airline/Flight: \_\_\_\_\_ Departure time: \_\_\_\_\_ Arrival time: \_\_\_\_\_

Date: \_\_\_\_\_

Leaving from: \_\_\_\_\_ Final Destination: \_\_\_\_\_ Connecting in: \_\_\_\_\_

Airline/Flight: \_\_\_\_\_ Departure time: \_\_\_\_\_ Arrival time: \_\_\_\_\_

Airline/Flight: \_\_\_\_\_ Departure time: \_\_\_\_\_ Arrival time: \_\_\_\_\_

- ✓ Use this sheet for confirmed information (not as a worksheet) and take it with you on the trip.
- ✓ Keep all your award membership cards (i.e. car rental, airline, hotel, etc...) in the business card holder for this section.
- ✓ Keep travel articles and email confirmations in the pocket tab.

Continue →



# Vacation (continued)



## Flight Information (continued):

Date: \_\_\_\_\_

Leaving from: \_\_\_\_\_ Final Destination: \_\_\_\_\_ Connecting in: \_\_\_\_\_

Airline/Flight: \_\_\_\_\_ Departure time: \_\_\_\_\_ Arrival time: \_\_\_\_\_

Airline/Flight: \_\_\_\_\_ Departure time: \_\_\_\_\_ Arrival time: \_\_\_\_\_

Travel Agent/Tel.#: \_\_\_\_\_ Transportation to and from airport/Tel#: \_\_\_\_\_

E Ticket:                       Paper Ticket:                       Need Passport(s): Yes or No

## Rental Car:

Company: \_\_\_\_\_ Tel. #: \_\_\_\_\_

Reservation Dates: \_\_\_\_\_ Confirmation #: \_\_\_\_\_

Type of car: \_\_\_\_\_ Cost / day: \_\_\_\_\_

Type and Cost of Insurance: \_\_\_\_\_

Contact name/Tel. #: \_\_\_\_\_

Free Mileage? Yes or No                      Reserved infant car seat? Yes or No

Cost / day: \_\_\_\_\_ Confirmation: \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_

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