



ARTroads; The Art & Cooking Party

Complete, copy and take this list with you. Give a copy to a friend or office mate.

Your Information

Name	
Nickname	
Home address	
Home phone	
Mobile or cellular phone	
Home fax	
Home e-mail address	
Birthday (MM/DD/YYYY)	
SSN	
Passport number	
Driver's license number	

Business Information

Company	
Business address	
Job title	
Business phone	
Business fax	
Business e-mail address	
Manager's name and phone	
Assistant's name and phone	
Web page address	

Emergency and Medical Information

In case of emergency, contact	
Emergency contact's address	
Emergency contact's phone	
Doctor's name	
Doctor's phone	
Doctor's address	
Medical insurance carrier and member number and telephone number*	
Blood type	

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Known medical conditions	
Known allergies	
Current medications	

Airline Information	Flight #1	Flight #2	Flight #3	Flight #4
Date				
Airline				
Airline phone number*				
Flight number				
Departure city				
Departure time				
Destination city				
Arrival time				

Car Rental Information	
Pick-up date	
Company	
Company phone number*	
Confirmation number	
Quoted rental rate	
Pick-up location	
Drop-off location	
Drop-off date	

Hotel Itinerary				
Date	Hotel	City, Country	Reservation confirmation number	Phone number*

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Credit Cards and Travelers Checks			
Credit card type	Issuing bank	Credit card number	Phone number*
Traveler's check type	Value	Check number	Phone number

* be certain you have a local number, not just the 800 number, which can be dialed from outside the country