



Airfare and Car Rental Quote Request Form

Please complete the form below and return it by fax to (866) 482-6775.
Anthony Travel is accepting requests for both individual and group reservations.
You will be contacted by a Sports Travel Consultant with options and pricing.

Contact Name: _____ E-Mail: _____

Team Name: _____

Division: _____ Region: _____ Qualifying Date: _____

Competing in: Football Cheer Dance Daytime Telephone: _____

Evening Telephone: _____ Cell Phone: _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____

Number of Travelers: _____ Preferred Departure Date: _____

Preferred Departure City/Airport: _____

Preferred Time of Departure: AM PM Destination City/Airport: Orlando (MCO)

Preferred Return Date: _____ Preferred Airline: _____

Preferred Time of Return: AM PM Return City/Airport: _____

To reduce the fare, we will consider: _____ Splitting the group _____ Changing departure/return time
_____ Changing the departure date _____ Changing the return date
_____ Alternate departure airport _____ Alternate return airport

I/We will need a rental car or van. Yes No

Please indicate the number and type(s) of vehicle(s) you are requesting:

_____ 12 passenger van _____ Economy car _____ Other, please specify.
_____ Minivan _____ Mid-Size car _____
_____ Full-Size car _____
_____ SUV _____



Airfare Reservation Form

Please complete the form below and return it by fax to (866) 482-6775.

Please provide the full name, as shown on government issued IDs, of all travelers in your party. In order to secure your tickets, full-payment is due at the time of purchase. Seats/tickets cannot be held without payment.

Please print or type all names clearly to avoid any delays in your reservation.

Contact Name: _____ Division: _____

Team Name: _____ Region: _____

Competing In: Football Cheer Dance

*Please note: In the event it is necessary to split your group, one adult/sponsor must accompany any group of children.
Please circle either "Adult" or "Child."*

Name: _____	Adult Child	Name: _____	Adult Child
Name: _____	Adult Child	Name: _____	Adult Child
Name: _____	Adult Child	Name: _____	Adult Child
Name: _____	Adult Child	Name: _____	Adult Child
Name: _____	Adult Child	Name: _____	Adult Child
Name: _____	Adult Child	Name: _____	Adult Child
Name: _____	Adult Child	Name: _____	Adult Child
Name: _____	Adult Child	Name: _____	Adult Child
Name: _____	Adult Child	Name: _____	Adult Child
Name: _____	Adult Child	Name: _____	Adult Child
Name: _____	Adult Child	Name: _____	Adult Child

PAYMENT POLICIES

Full payment is due at the time of booking. Tickets will **not** be held without payment by either wire transfer or credit card. To pay with a wire transfer, please call (866) 833-3386. Tickets are non-refundable from the time of purchase.

Please indicate your method of credit card payment: Amex Visa MasterCard Discover

Card Number: _____ Expiration Date: _____

I authorize Anthony Travel to charge this air reservation order with the card listed above. I have read and understand the payment policies and authorize all related charges on the card listed above.

Cardholder's Name: _____ Authorized Signature: _____

Please Print

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