

**Maxwell AFB ITT** 

334-953-6351

## TICKETS ARE NON REFUNDABLE NO EXCHANGES

TRAVEL DATE:	NEED TICKETS BY:
LAST NAME:	FIRST NAME:
RANK/STATUS: Milit	ary ID/CAC #:
EMAIL:	

I certify the above information is true and that I am currently Active Duty, Retired member of the United States Armed Forces Present spouse of AD/Retired, Reserve in Active Duty Status, or a Department of Defense Civilian employee. It is a federal offense (818 USC Sec. 1343) to wrongfully obtain government services/privileges under false pretenses, which is punisable by fines and imprisonment for up to 20 years.

TICKET DESCRIPTION (include park)	AD/CH	QTY	PRICE ea.	TOTAL		
example: Disney 4 Day Salute Hopper	Adult	3	\$296	\$888		
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Y PAN				E		
**Please provide names of e					<b>).</b> **	
DEBIT/CREDIT CARD INFORMATION (	We accept Visa, Mast	er Card, a				
			Highlight one: SHIP TO BILLING ADDRESS			
NAME ON CARD.				<u> </u>	RES	
NAME ON CARD:	15		SHIP TO BIL	LING ADD		
NAME ON CARD: BILLING ADDRESS:	5		SHIP TO BIL	LING ADD		
			SHIP TO BIL HOLD AT ITT CARE	LING ADD		
BILLING ADDRESS:	Γ: ΖΙΡ:		SHIP TO BIL HOLD AT ITT CARE	FOR PICK		
BILLING ADDRESS: ST	C: ZIP: EXP DATE: (A call will be place	ed to requ	SHIP TO BIL HOLD AT ITT CARE	FOR PICK THOLDER	UP I	
BILLING ADDRESS:	F: ZIP: EXP DATE: (A call will be place on th	ed to requ e card to p	SHIP TO BIL HOLD AT ITT CARE CVV est the beginn protect and cor	ING ADD	UP I e dig ord	
BILLING ADDRESS:	F: ZIP: EXP DATE: (A call will be place on th	ed to requ e card to p ount of (A	SHIP TO BIL HOLD AT ITT CARE CVV est the beginn protect and cor	FOR PICK TFOR PICK THOLDER ing twelve mplete the	UP E e dig ord	