



AMBASSADOR LEADERS TRANSPORTATION DEVIATION FORM

The transportation deviation form is required for any student requiring pick up and drop off services from a train station or airport other than the program-designated airport. This accommodation requires an additional fee and advance notice of 30 days. (The fee is \$150 per instance, therefore accommodating for both an arrival and a departure deviation, the total fee would be \$300.) The program office must receive your student's travel information form before processing this deviation request. If you have not yet submitted the travel information form, please fax it along with this form to 888.501.3455.

Program name _____ Program dates ____/____/____ to ____/____/____

Program location _____

Student full legal name _____
last first middle

Mailing address _____
street city state zip/postal country

Student email _____

Parent/guardian names #1 _____ #2 _____

Mobile phone (_____) _____ Mobile phone (_____) _____
parent/guardian #1 parent/guardian #2

Parent/guardian home phone (_____) _____ Parent/guardian email _____

PAYMENT*

I wish to purchase the transportation deviation for \$300 both arrival and departure \$150 arrival only \$150 departure only. The fee covers the cost of meet-and-greet transportation upon arrival to and departure from the alternate airport or train station. The alternate airport or train station must be within 30 miles of the program location.

*All payments must be made in U.S. funds.

Bill to my account (only available if more than 60 days prior to departure date.)

Bill to _____
last first middle

Address _____
street city state zip/postal county

Pay by credit card now

Select one of the following payment options

MasterCard Visa Discover American Express

Card number _____ - _____ - _____ Exp. date ____/____/____

Name _____ Signature _____
print exactly as shown on card as shown on card

AUTHORIZATION

I represent that all statements made herein are true and correct. **I understand this application is subject to the terms and conditions of this program.** Incomplete information may cause a delay in the processing of this form.

Parent/guardian signature _____ Date ____/____/____