



Flight Information Form

1. If your child is flying: We encourage you to purchase e-tickets, if available. Please be sure to **complete and return this Flight Information Form**.
2. We strongly suggest that all campers travel as adults when possible. Please note that most airlines will require children under 12 to travel as Unaccompanied Minors.
3. Please attach a copy of your child's **itinerary** with this Flight Information Form.
4. Campers flying for the **session A** should arrive at LaGuardia Airport between 8:30AM - 10:30AM on the first day of the session.
5. Campers flying for the **sessions B or C** should arrive at LaGuardia Airport between 4:00PM -6:00PM on the first day of the session.
6. Departures at the end of the **sessions A or B** should be scheduled from LaGuardia Airport, between 4:00PM – 6:00PM on the last day of the session.
7. Departures at the end of the **session C** should be scheduled from LaGuardia Airport, between 4:00 PM and 6:00PM on the last day of the session.
8. If you have any other travel questions or concerns, please contact the camp office at (718) 436-8255 x107 before finalizing your child's travel plans.
9. **For flights scheduled at other times there will be an additional \$100 transportation fee.**

Camper's Name: _____ Age (at time of travel): _____

Parent's Name: _____

Session: A (Wed, June 28th – Tue, July 18th) B (Tue, Jul 18th – Tue, Aug 8th) C (Tue, Aug 8th – Mon, Aug 21st)

Session: A&B (Wed, June 28th – Tue Aug 8th) B&C (Tue, Jul 18th – Mon, Aug 21st) Full (Wed, June 28th – Mon, Aug 21st)

Phone (Home): _____ Phone (Cell): _____

Address: _____

City: _____ State: _____ Zip: _____

Flight Confirmation #: _____

Please provide credit card information for use in case rescheduling a flight is necessary.

Visa Master Card Discover American Express

Name on Card _____ Card # _____ Exp. Date ____/____/____

Billing Address (if different than home address provided above) _____

My child will be sent as an unaccompanied minor. Yes No

My child should be sent home as an unaccompanied minor. Yes No

I will pay the unaccompanied minor fee for both flights. Yes No

Attached to this letter is my payment for the unaccompanied minor fee. Yes No

First day of session Day: _____ Date: _____

Flying from airport:	To airport:
Airline:	Flight #:
Departure time:	Arrival time:

Last day of session Day: _____ Date: _____

Flying from airport:	To airport:
Airline:	Flight #:
Departure time:	Arrival time: