

## **FLIGHT DETAILS FORM**

Name of Member Association:		
Contact Person:		
MOBILE NUMBER:	PHONE NUMBER	:
E-MAIL:		

## Please type clearly in CAPITAL LETTERS.

Group 1	ARRIVAL	DEPARTURE
Day/Date		
Time		
Flight No.		
Total no. of person		
Name of Group Leader		
Airport (Airport Aurora, Guatemala)		

<sup>\*\*</sup>Please mention

Group 2 (if any)	ARRIVAL	DEPARTURE
Day/Date		
Time		
Flight No.		
Total no. of person		
Name of Group Leader		

Airport (Airport Aurora, Guatemala)		
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Group 3 (if any)	ARRIVAL	DEPARTURE
Day/Date		
Time		
Flight No.		
Total no. of person		
Name of Group Leader		
Airport (Airport Aurora, Guatemala)		

<sup>\*\*</sup>Please mention

Group 4 (if any)	ARRIVAL	DEPARTURE
Day/Date		
Time		
Flight No.		
Total no. of person		
Name of Group Leader		
Airport (Airport Aurora, Guatemala)		

<sup>\*\*</sup>Please mention

Group 5 (if any)	ARRIVAL	DEPARTURE
Day/Date		
Time		
Flight No.		
Total no. of person		
Name of Group Leader		
Airport (Airport Aurora, Guatemala) )		

<sup>\*\*</sup>Please mention

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