

Airport Pickup Registration Form

Please email the completed registration form to john_jones@tamu-commerce.edu no later than the required deadline.

ALL INFORMATION IS REQUIRED WITH FULL TRAVEL ITINERARY

First/ Given Name:

Last/ Family Name:

CWID#:

Telephone Number:

Home Country Address:

Home Country Address:

Email:

Emergency Contact in Home Country

Name:

Relationship:

Telephone Number:

Email:

Emergency Contact in United States

Name:

Relationship:

Telephone Number:

Email:

You will be required to provide a copy of your travel itinerary from your home country to Dallas, TX.

Departure Date:

Departure Airport/City:

Departure Time:

Departure Airline:

Flight Number:

Arrival Date:

Arrival Airport:

Arrival Time:

Arrival Airline

Flight Number:

Arrival Gate (if known):

Destination Address in Commerce, TX:

Residence Name/ Hotel Name:

Address:

Phone Number:

Initials are required:

By writing your initials you confirm you have read the *Airport Pickup Information* form, agree to all terms of the airport pickup service, understand arrangements for your housing in the Dallas/Fort Worth are and/or Commerce are your responsibility, and agree to have your student account charged the \$50 non-refundable fee.

Initial Here

**Please email the completed registration from to
john_jones@tamu-commerce.edu.**