

Travel Interest Form

Atlantic Casualty Insurance Company



Agency Name: _____ Code: _____

Please complete all fields

Primary Traveler Information (must match travel documents i.e. Passport or Drivers License)

First Name:		Middle Name:		Last Name:		Suffix:		Name Badge (if different):		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Birth Date:		Document Type:		Issue Date:		Citizenship: <input type="checkbox"/> US Citizen Other:		Issuing Authority:			
		Number:		Exp. Date:							
Home Address:				City:		State:		Zip Code:		Traveler Type: <input type="checkbox"/> Agency Owner <input type="checkbox"/> Agency Employee	
Cell Phone:			Secondary Phone (required):			Email Address (airline itinerary and e-tickets will be sent here):					
Emergency Contact Info				Frequent Flyer Programs				Trusted Traveler Programs			
Last Name:		First Name:		Airline: Number:		TSA Pre-Check Number: Expiration Date:					
Phone:		Relationship:		Airline: Number:		Global Entry Number: Expiration Date:					

_____ # of couples to register for Spain _____ # of couples to register for Disney by Land & Sea

_____ **Total # of registered couples x \$600 deposit per registration = _____ Total amount due**

Please refer to the Incentive Travel Guide on aotrips.com for more information on who qualifies as an eligible traveler. Full registration forms, as well as a hold harmless agreement and copies of all valid passports/IDs will be required before travel dates can be assigned.

You will receive the registration forms once you have fully qualified and date selection begins.

Send completed form with check made payable to Auto-Owners Insurance to:

Incentive Travel – Do Not Open
Auto-Owners Insurance Company
PO Box 30660
Lansing, MI 48909-8160

Questions? Call (800)346-0346 Ext. 50387