

TRIP DETAILS FOR ASC PARTICIPANTS

Please print clearly or type.

Last Name	First Name		Middle Name	Suffix	
Sex	TSA Precheck/Global Entry #:		Dietary Restrictions:		
🗆 Female 🛛 Male					
Passport Status: □ Valid for six months after redeployment □ No passport yet □ Renewing □					
Contact Information		Emergency Contact Information			
Cell Phone:		Name:			
Home Phone:		Cell Phone:			
Preferred Email:		Home Phone:			
Address Deploying From:		Closest Major Airport Name:			
Line 1:	City:		Country:		
Line 2:	State/Province/Regi		: ZIP/Postal:		
Mailing Address: (If different from above. Also used for issuance of Antarctica Service Medals for eligible participants.)					
Line 1:	City:		Country:		
Line 2:	State/Province/Region:		ZIP/Postal:		
Hotel Preference	Room Type 🛛 1 Bed		□ 2 Beds	🗆 No Hotel Required	
(All hotel rooms in NZ and Chile are non-smoking)	Local contact phone #:		Hotel Roommate:		
Full-Time Personnel: Any	Any pre-deployment personal time?				
	Carrying high-value equipment (<i>single piece of equipment worth more than</i> Pes No <i>\$1,000, excluding laptops or cameras</i>)?				
<i>Grantees:</i> Will you require a visa support letter? This only applies to those traveling on passports □ Yes □ No from non-visa waiver countries. <u>A list of visa waiver countries can be found here.</u>					
What is your event # or group name you are traveling with?					
Notes or Other Special Requir	ements:				

Complete and submit this form via:

SCAN VIA BOX (preferred) https://nsf-usap.app.box.com/

DO NOT RETURN FORMS BY EMAIL; ASC EMAIL SERVERS ARE NOT SECURE.

FAX OR U.S. MAIL TO ASC TRAVEL

303-705-0742 7400 South Tucson Way Centennial, CO 80112-3938

