Wheelchair Description Form

Please complete this form prior to your arrival at the airport. Please provide as much detailed information as possible. Present a copy of this form each time you check in for a flight where it is necessary to check your wheelchair for stowage. Mahalo!

Name Confirmation #	Destination Phone Alternate Phone

Itinerary Information

Outbound	Date	**Return**	Date
Departure City	Flight #	Departure City	Flight #
Arrival City	Departure Time	Arrival City	Departure Time
Departure City	Flight #	Departure City	Flight #
Arrival City	Departure Time	Arrival City	Departure Time

Motorized: ☐ Wet Cell Battery (remove from chair) ☐ Dry Cell Battery (do not remove)

Manual: ☐ Foldable/Collapsible ☐ Not Foldable/Collapsible

Wheelchair Disassembly Instructions

Wheelchair Assembly Instructions

Print

Form data will not be saved with form. Complete form then print immediately or data will be lost.