

Family and Friends Assistance Support Plan

Passenger/Crew, Relatives and Friends Information Form

Passengers' Assistance room ☐ Relatives and Friends Assistance room ☐
 Crew Assistance room ☐ Crew Relatives' Assistance room ☐
 Remains' room ☐ (number of bodies): nr.

Date

Time

Passenger name

Flight number Route

Passenger Details

Last name:.....
 Name:.....
 Maiden name: Gender: ☐ M ☐ F
 Date of birth:.....
 Nationality:.....
 Languages spoken:.....
 Permanent Address:.....
 Phone number:.....
 Airport of origin:.....
 Final Destination :.....
 Passenger travelling together with (name of passenger/group):

Close Relative/Friend to inform:

Last name:.....
 Name:.....
 Address:.....
 Phone number:.....
 Relationship:.....

Relative/Friend Details

Last name:.....
 Name:.....
 Address:.....
 Phone number:.....
 Relationship with passenger:.....
 Physical details:.....

Further Details

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Filled by: