

**Schofield Barracks
Leisure Travel Services
Bldg 3320, Flagview Mall
Schofield Barracks, Hawaii 96857
www.himwr.com/lts
Telephone: (808) 655-9971 Fax: (808) 655-8521**

SB LTS ACTIVITY REQUEST FORM:

I, _____, the undersigned, agree to pay in full for airline tickets, tour packages and/or activities ordered by LTS Schofield Barracks. LTS Schofield Barracks is hereby authorized to charge my credit card \$ _____. **By submitting this request, I certify the information provided is true. It is a Federal offense (818 USC Sec. 1343) to wrongfully obtain government services/privileges under false pretense, which is punishable by fines and imprisonment for up to 20 years.**

Credit Card Holder signature: _____

Print Full Name: _____

Military Status: ___ Active Duty ___ Family Member ___ Retired ___ VA ___ DoD

Home phone: _____

Office phone: _____

Cell phone: _____

Today's Date: _____

E-mail address: _____

Leave a good contact number for agents to call and verify activity and to obtain credit card information over the phone.

Please fill out back of sheet for activities and reservation:

Voucher is needed to check in at attraction and must be picked up at the Schofield Barracks LTS office before the date of event. All ticket sales are non-refundable and non-transferrable. Schofield Barracks LTS is not responsible for lost or stolen tickets.

Must provide military ID and credit card matching ID when picking up the voucher.

****Any food allergies (if doing an activity with food)?***

****Anyone in party pregnant? Restrictions in place for some activities.***

****For Kualoa Ranch, child first name, last name, and age required.***

Activity Request Form (pg. 2)

Please list the attractions you will be purchasing:

Sponsor Name: _____

VENDOR Company name	ACTIVITY Specify tour, package, etc.	QUANTITY Specify adult/child/infant; Refer to pricelist for age groups & terms	ACTIVITY DATE Provide 2 back up dates	ACTIVITY TIME Provide 2 back up times	TOTAL COST

Do you wish to have your vouchers sent to you via Fed Ex for an additional \$5-\$10, or would you like to pick them up at our LTS Office? We do NOT ship to P.O. Boxes, work addresses/offices, or hotels.

- Pick up OR send to my:
- Billing address _____
- Other address: _____

Additional Notes / Information:

