SERVICE/EMOTIONAL SUPPORT DOG FORM

TO ENSURE AN EFFICIENT PROCESS, PLEASE COMPLETE AND SUBMIT THIS FORM TO ACCESSIBILITY@FLYFLAIR.COM AT LEAST 48 HOURS IN ADVANCE OF TRAVEL. PLEASE ENSURE TO ALWAYS KEEP THE COMPLETED FORM WITH YOU WHILE TRAVELLING. PLEASE NOTE THAT SHOULD THE FORM NOT BE PROVIDED AT LEAST 48 HOURS IN ADVANCE OF TRAVEL; YOUR SERVICE DOG MAY BE REFUSED TRAVEL AT THE AIRPORT.

YOU ARE REQUIRED TO ENSURE YOU ARE COMPLYING WITH THE ENTRY REQUIREMENTS FOR THE COUNTRY AND/OR DESTINATION YOU ARE TRAVELLING TO. FAILURE TO PROVIDE THE REQUIRED DOCUMENTATION CAN RESULT IN THE PASSENGERS BEING REFUSED ENTRY, THE ANIMAL BEING SEIZED AND/OR QUARANTINED, AND IN EXTREME CASES, EUTHANIZED.

SERVICE/EMOTIONAL SUPPORT DOG AND USER/HANDLER INFORMATION

SERVICE DOG HANDLER'S SURNAME	E	SERVICE DOG HANDLER'S FIRST NAME
CONTACT PHONE NUMBER		EMAIL ADDRESS
SERVICE DOG USER'S SURNAME (IF DIFFERENT FROM HANDLER)		SERVICE DOG USER'S FIRST NAME (IF DIFFERENT FROM HANDLER)
TELEPHONE NUMBER		
SERVICE/EMOTIONAL SUPPORT DO	G'S NAME	SERVICE DOG BREED
WEIGHT (KG)	HEIGHT (CM)	WIDTH (CM) (SHOULDER TO SHOULDER)



CONFIRMATION CHECKLIST			
ANIMAL HEALTH			
ANIMAL IS VACINATED FOR RABIES		YES 🗆	NO 🗆
DATE OF VACINATION:	VACCINATION EXPIRY DATE:		
TO MY KNOWLEDGE, OR A DISEASE THAT WOULD ENDANGER OTHER ANIMALS		_ DOES NOT HAVE FLEAS C	OR TICKS
VETERINARIAN NAME	TELEPHONE NU	MBER	INITIAL
TO ASSIST ME WITH MY DISABILITY		DRK OR PERFORM TASKS	INITIAL
HAS BEEN 1			
I UNDERSTAND THAT A PROPERLY TRAINED DOG REMAINS UNDER THE CONTROL OF ITS HANDLER I UNDERSTAND THAT A PROPERLY TRAINED DOG DOES NOT ACT AGGRESSIVELY BY BITING, JUMPING, LUNGING, OR INJURING OTHER PEOPLE OR OTHER ANIMALS			
I UNDERSTAND THAT A PROPERLY TRAINED DOG SHOUI AIRCRAFT OR IN THE GATE AREA	_D NOT DEFECATE	OR URINATE ON THE	
I CONFIRM THAT MY ANIMAL IS TRAINED NOT TO RELIEV THAT IT WILL NOT NEED TO RELIEVE ITSELF IF THE FLIG MORE			
I UNDERSTAND THAT IF PROPERLY TRAINED TO BEHAVE IN PUBLIC, FLAIR MAY T FEE AND REQUIRING THEM TO BE TRANSPORTED IN A C THE SIZE REQUIREMENTS.	REAT THEM AS A P	ET RESULTING IN A PET	

TO THE BEST OF MY KNOWLEDGE, AGGRESSIVELY OR CAUSED SERIOUS INJURY TO ANOTH		
IF YOU CANNOT VALDATE THE ABOVE STATEMENT, PLEA	ASE EXPLAIN:	
NAME OF TRAINER OR TRAINING ORGANIZATION	TELEPHONE NUMBER	
OTHER ASSURANCE		
		INITIAL
I UNDERSTAND THAT OR TETHERED AT ALL TIMES IN THE AIRPORT AND ON TH		
I UNDERSTAND THAT MY EMOTIONAL SUPPORT DOG MU UNDER THE SEAT IN FRONT OF ME FOR THE DURATION		
I UNDERSTAND THAT IF AIRLINE MAY CHARGE ME FOR THE COST TO REPAIR IT, A CHARGE PASSENGERS WITHOUT DISABILITIES TO REPAIL	AS LONG AS THE AIRLINE WOULD ALSO	
BY SIGNING THIS FORM, I CAN CONFIRM THAT ALL COMPLETE, TRUE, AND ACCURATE TO THE BEST O		IS
SIGNATURE OF SERVICE/EMOTIONAL SUPPORT DOG US	ER/HANDLER DATE	

INITIAL