



SPECIAL SERVICES REQUEST FORM - PLEASE PRINT. PLEASE COMPLETE IN FULL - *MANDATORY INFORMATION

For detailed information on airline policies and procedures please visit: <https://www.sunwing.ca/pages/en/sunwing-airlines/special-assistance>

*Passenger Name: _____ *Booking Number: _____
*Travel Dates: _____ *Telephone Number: _____
*Description of Special Needs: _____ *Email (if applicable): _____

If the below requests are not applicable to your needs, kindly email specialservices@sunwing.ca with the details of your request.

POC Supplementary Oxygen (Additional cost) Please note additional forms will be sent for POC and Oxygen requests.

*Allergy(s): _____ Is the allergy airborne? Yes No

OBESE PASSENGERS:

If you are a person who is unable to sit in the aircraft seat without raising the armrest, we would like to hear from you.

Do you require the use of an additional seat? (Additional cost) Yes No

Do you require the use of an additional seat belt? Yes No

If we are not informed in advance we will not be able to accommodate you at the time of check-in.

SERVICE REQUESTED FOR THE AIRPORT: Airport assistance – please specify

Non Ambulatory Meet & Assist Briefing Wheelchair at the check-in counter Other Mobility Aid

If passenger is requiring a wheelchair at the airport check in counter please specify below

Can the passenger climb steps and can walk in cabin (WCHR) Yes No

Passenger is unable to climb steps, can walk in cabin (WCHS) Yes No

Unable to climb steps or walk in cabin (WCHC) Yes No

Is the passenger traveling with their mobility aid? Yes No

If YES, please specify: Manual Electric Electric Scooter Walker

Please provide us with the dimensions and weight of the wheelchair/ scooter (must be no larger than 48" width x 31" height):

If the wheelchair is electric please specify the type of battery (wet cell not accepted):

Please note that any mobility item may be required to be tilted or placed on its side. Local government regulations at some Sunwing destinations may not permit your mobility item to be brought to the jet-bridge and it may be returned to you in the terminal instead. If this is the case, alternate assistance will be provided to you that will enable you to reach the terminal area.

GROUND REQUESTS (TRANSFERS & HOTEL):

Requests not seen below are considered as preferences, please contact the Sale/Reservation Centre for assistance.

Please note that not all hotels or destinations provide wheelchair services and for those that do, additional costs may be applicable locally.

Does the passenger require:

Wheelchair Accessible Room Accessible Room Ground Floor Room
Accessible Shower Centrally Located Room Room Close to Elevator

If the above request is not able to be confirmed, will the passenger accept a regular room? Yes No

Will the passenger require a separate transfer in destination? (Additional cost) Yes No

Passenger Signature: _____ Date: _____

Once completed please fax to 416-798-8550 or email to specialservices@sunwing.ca at least 48 hours prior to departure. Special Services hours are Monday to Friday 8am to 6pm EST.

For detailed information on Sunwing's policies and procedures please visit section "Customer With Special Needs" of its Terms & Conditions

<https://www.sunwing.ca/Pages/en/terms-and-conditions>