



MY WHEELCHAIR INFORMATION

PLACE A CIRCLE AROUND THE TYPE OF DEVICE
YOU ARE TRAVELING WITH



NOTE ON THE PICTURE WHERE TO LIFT THE
CHAIR AND LOCATION OF BRAKE RELEASE

OWNER: _____

PHONE: _____ CONFIRMATION #: _____

WEIGHT OF THE CHAIR _____ lbs./kg

BATTERY TYPE:

NON - SPILLABLE (DryCell/Gel)

SPILLABLE (Wet Cell/Acid)

LITHIUM (Total Watts: _____)

ARE THERE ANY REMOVABLE PARTS YOU WILL BE TAKING
WITH YOU ONBOARD?

1. _____ 2. _____

3. _____ 4. _____

5. _____ 6. _____

HUB / BRAKE RELEASE / HOW TO PUT IN "FREEWHEEL":

WHAT FOLDS OR COLLAPSES?

LIST TYPE AND LOCATION OF ANY PRIOR DAMAGE:

SPECIAL INSTRUCTIONS / PRECAUTIONS:

SEE INSTRUCTIONS ON BACK

FOLD HERE

FOLD HERE

FOLD HERE

INSTRUCTIONS:

1. Complete the “MY WHEELCHAIR INFORMATION” form to the best of your knowledge before travel.
2. Present the “MY WHEELCHAIR INFORMATION” form to any crewmember to assist them in completing information about your device.
3. Include the “MY WHEELCHAIR INFORMATION” form with your device when checking it as additional information to our tags.
4. Please securely attach to your device this document (temporarily or permanently) to ensure proper handling and stowage.