



TRAVEL
INVESTMENT
ADVISORS

MGA Travel - Emergency Contact Information Form

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Thank you for the taking the time to provide this Information. Your completion of this form helps us secure an emergency contact of your choice for the rare occasion that such is needed. This information will be stored and used by MGA Travel on your behalf, including sharing it with your tour operator, cruise line, or resort.

YOUR INFORMATION

Your Full Name: _____ Your Agents Name: _____

Your email Address: _____ Today's Date: _____

EMERGENCY CONTACT INFORMATION

Emergency Contact: _____ Relationship to you: _____

Phone Number: _____ Email Address: _____

Address: _____ City: _____

State/Zip Code: _____

THANK YOU!

Submit button disabled on some browsers. Open with your PDF reader, or save on your computer to fill, print or submit.