



特殊旅客服务需求单A类（正面）

为方便旅客旅行，西部航空有限责任公司特制订此申请表，申请表中列明航空公司为特殊旅客提供的简单服务项目。该服务项目包括轮椅服务、引导服务等，不需要旅客提供适宜乘机的医疗诊断证明。

当您电话订票或在售票处买票时，请参照此表背面内容，提出您的需求。根据您提供的需求信息，西部航空有限责任公司将提前做出妥善安排，为您提供周到服务。如果您想了解更多细节，请联系西部航空95373或距您最近的西部航空售票处。

特殊服务内容描述如下，仅供参考，具体见背面。

引导服务：西部航空有限责任公司可为您提供引导服务，帮助您办理乘机手续，托运行李，协助您通过安全检查，进入候机厅休息，引导您至登机口登机。飞机到达后，服务人员引导您下机，协助您提取托运行李，护送您至候机楼出口。适用于年长旅客、残疾人旅客、有语言残疾旅客等需要西部航空提供引导服务的旅客。

轮椅服务：如果您需要轮椅服务，请在购票时提出。在机场值机柜台，服务人员会要求您将轮椅办理托运，西部航空可为您提供特殊轮椅服务。如果您打算使用自己的轮椅到达登机门，在购票时，应告知西部航空。因为飞机客舱内没有可供轮椅存放在空间，您自己的轮椅应在登机门办理托运，放入货舱。适用于行动不便的年长旅客、残疾人旅客、病患旅客等需要提供轮椅服务的旅客。

特殊旅客服务需求单A类（背面）

使用轮椅旅客（WCHS/WCHR）、听力/语言/视力残疾旅客（有人陪伴且有服务需求的旅客）、年长旅客（一般服务需求）、_____

尊敬的旅客朋友：

非常感谢您选乘西部航空有限责任公司航班，为了给您提供更好的服务，请您详细填写以下内容，在您需要选择的服务项目“□”内打“√”

A	个人信息	姓名		性别		年龄		
		航班日期		航班号		电话		
		始发站		经停站		目的站		
		证件种类		证件号码				
		地址						
B	身体状况	如果您听力/视力残疾旅客，是否携带导盲犬或助听犬？ 否 <input type="checkbox"/> 是 <input type="checkbox"/>						
C	轮椅服务	(1) 在机场是否需要轮椅服务？ 否 <input type="checkbox"/> 是 <input type="checkbox"/>	<input type="checkbox"/> 能上下台阶，但进行长距离移动时需要轮椅帮助（WCHR）。 <input type="checkbox"/> 不能上下台阶，但在客舱中能自己行动（WCHS）。					
		(2) 是否携带自有轮椅旅行？ 否 <input type="checkbox"/> 是 <input type="checkbox"/>	<input type="checkbox"/> 手动轮椅 <input type="checkbox"/> 机械轴环式	<input type="checkbox"/> 在值机柜台进行托运。 <input type="checkbox"/> 希望使用自有轮椅到达登机门，在登机门办理托运。 <input type="checkbox"/> 飞机到达后，希望飞机舱门口提取托运轮椅。 <input type="checkbox"/> 飞机到达后，希望在托运行李提取处提取托运轮椅。 * 目前客舱内无法放置旅客自有轮椅，敬请谅解。				
			<input type="checkbox"/> 电动轮椅	<input type="checkbox"/> 携带可溢出液体电池驱动轮椅（WCBW）。 <input type="checkbox"/> 携带密封式无溢出电池驱动轮椅（WCBD）。 <input type="checkbox"/> 飞机到达后，希望飞机舱门口提取托运轮椅。				

				<input type="checkbox"/> 飞机到达后,希望在行李转盘处提取托运轮椅。 *电动轮椅装入货舱所需时间较长,因此请您于普通旅客办理乘机手续截止前2小时到值机柜台进行轮椅托运。
		(3) 您是否需要客舱轮椅服务? 否 <input type="checkbox"/> 是 <input type="checkbox"/> *目前西部航空可以在A319、A320和A321机型上提供。		
D	引导服务	(1) 始发地是否需要引导您到达登机口? 否 <input type="checkbox"/> 是 <input type="checkbox"/>		
		(2) 中转地是否需要引导您到达中转航班登机区? 否 <input type="checkbox"/> 是 <input type="checkbox"/> 如选择“是”,请告知您中转航班号_____起飞时间_____。		
		(3) 目的地是否需要引导您至到达厅出口? 否 <input type="checkbox"/> 是 <input type="checkbox"/>		
E	其他	(1) 需要特殊座位? 否 <input type="checkbox"/> 是 <input type="checkbox"/> (靠近过道座位 <input type="checkbox"/> , 靠近窗口座位 <input type="checkbox"/>) 其他_____。		
		(2) 是否为残疾人团体? 否 <input type="checkbox"/> 是 <input type="checkbox"/> : _____		
F	随行	姓名: _____。 电话: _____。		
我,即为签字者,保证以上内容真实、有效。 旅客(监护人)签字: _____ 日期: _____。				
始发站地面服务人员		客舱乘务员		到达站地面服务人员
此单一式三联,第一联为始发站地面服务部门留存、第二联为到达站地面服务部门留存、第三联为旅客留存。				

Special Passenger Service Demand Sheet (Type A)

This application form has been designed to provide better services to passengers. It enumerates free service items available to special passengers including wheelchair services, guidance services. Medical information sheet certifying the passenger's flight-worthiness is not required.

When booking ticket via phone or buying ticket at the ticket counter, passengers should fill out the back of this form where appropriate so that West Air can make appropriate arrangement in advance based on the information provided to ensure thoughtful services. For more information, please contact West Air at 95373 or visit the nearest ticket office.

Special services are described below for reference only, see back for detailed information.

Guidance services

West Air can provide guidance services to passengers, including assisting passengers to go through check-in procedure, baggage check-in procedure and security check procedure, guiding passengers to the terminal to rest, guiding passengers to the boarding gate, guiding passengers out of the aircraft upon arrival, assisting passengers to retrieve checked baggage, and escorting passengers to the terminal exit. Apply to elder passengers, passengers with disability, passengers having difficulty in communicating (including foreign passengers) and those who need guidance service.

Wheelchair services

Passengers who require wheelchair services should apply at the time of ticket-buying. Service personnel at the airport's check-in counter will require passengers to go through wheelchair check-in procedure. West Air may provide special wheelchair services to passengers by placing the wheelchair beside the passenger's seat. If any passenger intends to use his/her own wheelchair up till the boarding gate, s/he should notify West Air at the time of ticket-buying. As there is no space to store wheelchairs in the cabin, passengers who intend to use their own wheelchairs need to go through baggage check-in procedure at the boarding gate and have their wheelchairs stored in the cargo cabin.. Apply to mobility-restricted older passengers, passengers with disability and other passengers physically or mentally impaired needing wheelchair service.

Special Passenger Service Demand Sheet (Type A-Back)

Special Passenger Service Demand Sheet (Type A)							
Wheelchair passengers (WCHS/WCHR), hearing/speaking/visually impaired passengers (accompanied passengers with service needs), Elderly passenger with General service needs,_____.							
Dear passengers: Thanks for choosing West Air's flights. Please fill out this form in details by ticking items in <input type="checkbox"/> so that we can provide better services to you.							
A	Personal information	Name		Sex		Age	
		Flight date		Flight No.		Tel	
		Starting Airport		Stop-over airport		Destination	

		Certificate		Number of certificate	
		Address			
B	Physical condition	For passengers with sight or hearing challenged, whether escorted by a seeing eye dog or hearing aid dog? No <input type="checkbox"/> Yes <input type="checkbox"/>			
C	Wheel chair services	Wheelchair service needed in the airport? No <input type="checkbox"/> Yes <input type="checkbox"/>	<input type="checkbox"/> Able to go up and down stairs, but need wheelchair for long-distance movement (WCHR) <input type="checkbox"/> Unable to go up and down stairs, but able to move unassisted in the cabin (WCHS)		
		Availability of passenger's own wheelchair? No <input type="checkbox"/> Yes <input type="checkbox"/>	<input type="checkbox"/> Manual wheelchair <input type="checkbox"/> Mechanical axle wheelchair	<input type="checkbox"/> Complete wheelchair check-in at the check-in counter <input type="checkbox"/> Prefer to use my own wheelchair to the boarding gate and complete wheelchair check-in at the boarding gate <input type="checkbox"/> Prefer to retrieve the checked wheelchair at the cabin door upon arrival <input type="checkbox"/> Prefer to retrieve the checked wheelchair at the baggage claim area upon arrival. * We regret to inform you currently there is no space in the cabin to store the passenger's own wheelchair.	<input type="checkbox"/> Travelling with a wheelchair driven by spill-able battery (WCBW) <input type="checkbox"/> Travelling with a wheelchair driven by sealed non-spill-able battery (WCBD) <input type="checkbox"/> Prefer to retrieve the checked wheelchair at the cabin door upon arrival <input type="checkbox"/> Prefer to retrieve the checked wheelchair at the baggage claim area upon arrival. * It takes a relatively

				long time to load the electric wheelchair in the cargo cabin, so please complete wheelchair check-in at the check-in counter 120 minutes before the departure time.
		Do you need on-board wheelchair service ? No <input type="checkbox"/> Yes <input type="checkbox"/> *West Air can provide you with on-board wheelchair services in A319 & A320 & A321 aircraft cabin .		
D	Guidance services	(1) Guiding service till the boarding gate required at the departure airport? No <input type="checkbox"/> Yes <input type="checkbox"/>		
		(2) Guiding service till the boarding area required at the transit airport? No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, please indicate transit flight number _____ and departure time _____.		
		(3) Guiding service to the arrival hall exit upon arrival required? No <input type="checkbox"/> Yes <input type="checkbox"/>		
E	Special in-flight arrangements need	(1) Bassinet required? No <input type="checkbox"/> Yes <input type="checkbox"/> Seats No.: _____		
		(2) Child seat required? No <input type="checkbox"/> Yes <input type="checkbox"/> Seats No.: _____		
F	Retinue	Name: _____ Telephone: _____		
I, the undersigned, hereby guarantee the above information is authentic and valid. Signature of passenger (guardian): _____ Date: _____				
Departure Service Staff		Crew		Arrival Service Staff
This form is in triplicate, with the first copy for the ground service department at the departure station to keep, the second copy for the ground service department at the arrival station to keep, and the third copy for the passenger.				