Mobility Aid Information Form

This form is used to collect information about your mobility device entrusted to us for transport. Please check the best answer to the questions below so we can provide the care your mobility device deserves.

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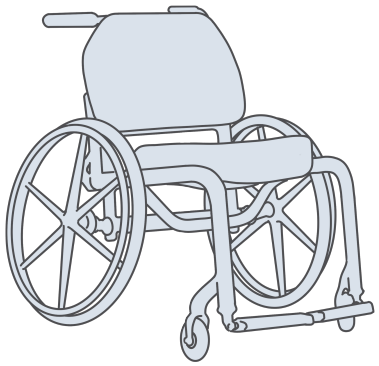
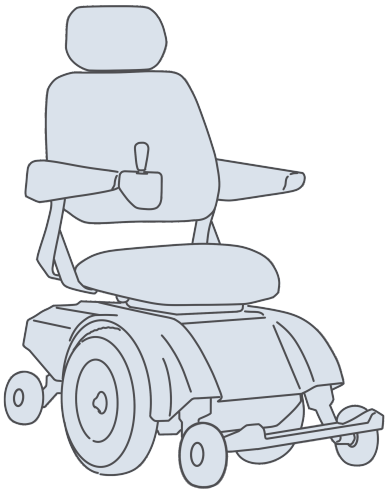
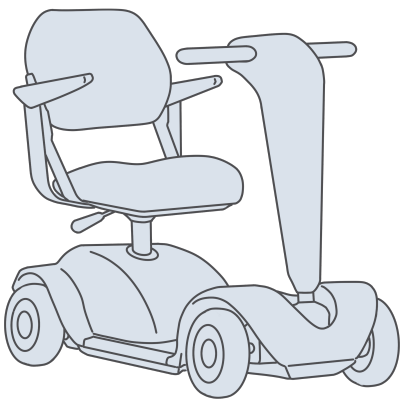
Indicate the preferred locations for handling your device on the image(s) below for loading and unloading







Manual Wheelchair

Is your wheelchair equipped with a brake or wheel lock:

☐ Yes ☐ No

Proceed to Special Instructions/Precautions

Battery-Operated Wheelchair or Scooter

Battery Type:

☐ Lithium-Ion* ☐ Spillable ☐ Non-Spillable

*Lithium Battery Advisory:

- A single lithium-ion battery up to 300 watt-hours (Wh) or two batteries up to 160 Wh each is allowed. If the battery exceeds these maximum watt-hours, they cannot be transported onboard an aircraft.
- Lithium-ion batteries must be removed and carried onboard with you. Please ensure you have proper packaging for transport in the cabin.

Where on your mobility device is the Freewheel Lever located:

☐ Base ☐ Tiller

Is your mobility device equipped with a main power switch:

☐ Yes ☐ No

Can the seatback of your device be folded down for storage:

☐ Yes ☐ No

Mobility Device Details:

Weight _____ lbs select the unit of weight used

Manufacturer _____ Model _____

Special Instructions/Precautions:

include any removable parts (e.g., foot rests, seat cushions, etc.). Please have these parts removed and secured for transportation either as checked baggage or in the cabin. All dangerous goods regulations apply.