•	ynx Aviation	PASS ELIGIBILITY				Number: 1079	
		Please Review Page			g form.	ctive Date: 07/20/09	
CONTACT: FRONTIER PASS BUREAU Phone: 720-374-4616 Fax: 720-374-4654 E-mail: passeligibility@flyfr Website: www.my						bility@flyfrontier.com : www.myfrontier.org	
FIRST MIDDLE Employee Name:			LAST	Employee ID #:			
Title:		Date of Birth: Dat		ate of Hire:	e: Gender: FOMO		
Employee Address: Phone: Email:							
Cit	y:	State:	Zip:		REDRESS NUMBER:		
	Eligible Family Member			Date of Birth	Gender	Relationship	
1	FIRST MID	DLE	LAST		FOMO	Spouse OR Domestic Partner	
2						Parent (Mother)	
3						Parent (Father)	
4					F () M ()	Dependent Child	
5					F M O	Dependent Child	
6					FOMO	Dependent Child	
7					FOMO	Dependent Child	
8					FOMO	Dependent Child	
Companion (if no spouse, domestic partner, or one or more parent)				Date of Birth	Gender		
1	FIRST MID	DLE	LAST		F M M		
2					F () M ()		
3					FO MO		
I hereby certify that the information contained in this form and on the supporting documents submitted with this form is true, accurate, and complete. I understand that submitting inaccurate information may result in a suspension of pass privileges and may also result in corrective action.							
Signature Date							
Privacy Notice:							
The Transportation Security Administration (TSA) requires you provide your full name, date of birth, and gender for the purpose of watch list screening, under the authority of 49 U.S.C. section 114, the Intelligence Reform and Terrorism Prevention Act of 2004 and 49 C.F.R. parts 1540 and 1560. You may also provide your Redress Number, if available. Failure to provide your full name, date of birth, and gender may result in denial of transport or denial of authority to enter the boarding area. TSA may share information you provide with law enforcement or intelligence agencies or others under its published system of records notice. For more on TSA privacy policies, or to review the system of records notice and the privacy impact assessment, please see the TSA website at www.tsa.gov.							

# Lynx Aviation

## PASS ELIGIBILITY

#### **General Instructions**

On line 1 of the Eligible Family Member section, list your Spouse or Domestic Partner. If you do not have or do not wish to list either of these, leave line 1 blank and enter a name of any individual on line 1 of the Companion section instead. Note: Companions must pay pass charges.

On line 2 of the Eligible Family Member section, list your Mother (biological, adoptive, or step-mother). If you do not have or do not wish to list your Mother, leave line 2 blank and enter a name of any individual on line 2 of the Companion section. Note: Companions must pay pass charges.

On line 3 of the Eligible Family Member section, list your Father (biological, adoptive, or step-father). If you do not have or do not wish to list your Father, leave line 3 blank and enter a name of any individual on line 3 of the Companion section. Note: Companions must pay pass charges.

On lines 4 through 8 of the Eligible Family Member section, list your Dependent Children and the Dependent Children of your Domestic Partner.

If you have listed a Spouse or Domestic Partner in line 1, a Mother in line 2, and a Father in line 3 of the Eligible Family Member section, then you may not list individuals in the Companion section.

The terms Spouse, Domestic Partner, Parents, and Dependent Children have detailed definitions. Please consult the pass policy for further clarification as to the meaning of these terms.

Required Supporting Documents (must accompany this form)

#### Spouse

Supporting documentation should include a copy of a marriage license or, if common law, a notarized Affidavit Declaring Common Law Marriage (form 1053).

#### **Domestic Partner**

A notarized Affidavit Declaring Domestic Partnership (form 1132).

#### Parent

Documents submitted should include a copy of the Eligible Employee's state issued birth certificate showing the names of the parents, adoption records showing the names of the adoptive parents, or marriage certificate of step-parents legally married to a biological parent.

### **Dependent Children**

Documents submitted with this form for Employee's dependent children and a Domestic Partner's or Common Law Spouse's dependent children must include copies of the dependent child's birth certificate showing the names of the parents or adoption records showing the names of the adoptive parents. You must also submit a copy of the first page of your most recent income tax return showing that the children were claimed as dependents for tax purposes. Copies of college registration papers indicating at least 12 credit hours of classes per semester or quarter must be submitted each semester or quarter for children over 21 seeking to qualify as a dependent due to status as a full-time student. Dependent status for college students is available until their 24th birthday. If you are claiming a child over 21 as a dependent due to a qualifying disability, you must submit a copy of the first page of your income tax return showing that the child has been claimed as a dependent for tax purposes.

A ticket is not required for eligible children under the age of 2 for domestic travel, but they must be listed on the form to receive tickets for international travel.

#### Companion

If you have not designated a spouse, domestic partner, or one or both parents on this form, you may designate one Companion in place of each. All Companions receive unlimited pass travel, but are required to pay the applicable pass charges. You may select anyone as a Companion and no supporting documentation is required. Off-line travel benefits are not available for Companions.

All accompanying documents must be submitted to the Pass Bureau.