

Mango Special Medical Needs request form

easy on the pocket,
easy on you.

flymango.com



Name and surname of guest:
Guest reference number
Flight nr: JE Date: Cell phone nr:
 JE Date:

Please complete the form and fax it back to us as soon as possible to : 086 522 2951

Please have your medical form and your confirmation (sms/email/fax) from the medical department with you at time of check-in.

Medical guests may not make use of the Self Service Check-in Kiosk.

Please select one of the following options:

- MAAS- Meet and assist- requires assistance to and from the aircraft, but no wheelchair is needed.
 WCHR-Require wheelchair to and from the aircraft but can walk up/down the stairs
 WCHS- Wheelchair to and from aircraft and assistance up/down the stairs
 WCHC- Wheelchair to and from aircraft up/down stairs and in cabin
 BLIND/DEAF- please advise if you have a service animal? YES NO

Please specify the reason for the special request? (elderly, sick, accident, young guest, quadriplegic, etc.)

Age of guest (years)

(please tick)

Are you able to walk up/down the stairs without assistance?

YES NO

Are you able to walk long distances?

YES NO

Are you able to manage in the cabin unaided?

YES NO

Are you able to sit unaided for the duration of the flight?

YES NO

Are you able to eat/drink unaided?

YES NO

Are you able to control bowels/bladder ?

YES NO

NOTE: GUESTS REQUIRING OXYGEN MUST CONTACT THE MANGO MEDICAL DEPARTMENT ON 086 111 3818 AT LEAST 48 HOURS PRIOR TO TRAVEL.

Other important information:

I have read the terms and conditions for Mango special needs and disabled passengers (Tick)

Please be advised that if you have any medical conditions that need clearance from a doctor as per our terms and conditions you must attach a letter from your attending physician. This letter must clearly state that you are fit to travel.

For any questions please contact us on 086 111 3818

(Our office hours are Mon - Fri 8:00-16:30. For after-hour assistance call 0861 1626 46.)

Date:

Signature: