



**FLYING DURING PREGNANCY FORM (FORM B)**

**28<sup>th</sup> to 35<sup>th</sup> week of pregnancy / 28<sup>th</sup> – 32<sup>nd</sup> week for twin/multiple pregnancy**

If you wish to travel beyond the end of the 27<sup>th</sup> week of pregnancy but you are not yet beyond the end of your 35<sup>th</sup> week of pregnancy (32<sup>nd</sup> for twin/multiple pregnancy) and you are unable to provide a medical certificate by your doctor, then we require you to confirm and sign the following before we can accept you for travel.

I \_\_\_\_\_ (full name of passenger) confirm that:

1. The estimated delivery date is.....
2. My doctor's name is .....
3. My doctor's address is.....  
.....
4. My pregnancy is progressing as normal and it's not a twin/multiple pregnancy\*
5. My doctor/gynaecologist has confirmed that it is safe to fly during my pregnancy

\*Twin/multiple pregnancy – you will also require a doctor's certificate confirming you are fit to fly, and the expected due date.

**This form collects personal data used for the following purpose:**

Where we need to protect your interests and your safety.

**Consent**

By consenting to this form and any information contained on it, you are giving us the permission to retain your personal information in paper form. Aurigny Air Services will destroy the form in a secure manner and will keep the form no more than 12 months after the baby's due date.

**Disclosure**

Aurigny Air Services will not pass on your personal data to third parties without first obtaining your consent.

**Principles of data protection**

We are required under the Data Protection Legislation Regulation to notify you of the information contained in the Privacy Policy.

Our Privacy Policy is available on our website [www.aurigny.com](http://www.aurigny.com).

I have read and agree to these terms.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_