



FREMEC – INITIAL REQUEST FORM



Dear Doctor,

The FREMEC card is an IATA accredited method of identification that allows airlines to offer better services to passengers with special needs.

Therefore, if your patient is a frequent flyer with a non-severe disability and has requested that the attached form be completed, please, take into consideration the following points:

- The card can only be issued to patients with stable chronic medical conditions;
- The card cannot be issued to passengers with recent medical needs or passengers who need oxygen aboard the aircraft.

The initial request form must be completed by the attending physician on behalf of the Applicant and be accompanied by medical recommendations and a statement on how long the disability is expected to remain stable.

In addition to filling out the FREMEC form, passengers with auditory or visual impairments must also provide an audiometric or ophthalmic medical report, whichever is the case.

Passengers with chronic and stable medical conditions are eligible for a FREMEC card and may request special assistance.

If you have any questions, please write to FREMEC@voegol.com.br.



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1. Full Name _____ Age _____

2. Full Address

3. City _____ State _____

4. Phone (____) _____

5. Diagnoses, beginning of the condition, episode or accident, clinical progress and treatment (describe the clinical picture in detail).

6. Is the illness/disability stable? Yes No As of when ____/____/____

7. Are there other comorbidities? Yes No If yes, explain.

8. Is a wheelchair required? Yes No

If yes, indicate which of the following options best describes the patient's mobility and requirements:

WCHC () Requires a wheelchair to/from the aircraft and must be carried up/down the steps and to/from their seat in the cabin (physically lifted).

WCHS () Requires the use of a wheelchair to get to the aircraft and navigate stairs, however, is able to reach their seat in the cabin.

WCHR () Requires a wheelchair to reach the boarding gate, however, is able to get into the aircraft and navigate steps to reach their seat in the cabin.

Signature and stamp of the physician authorized by the patient _____ Date _____



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9. Is the passenger able to use the cabin seat in the upright position when requested? Yes No

10. Is the passenger able to fly unaccompanied? Yes No

11. Is the passenger visually impaired? Yes No

If yes, an additional ophthalmic report must be presented indicating the passenger's visual acuity.

Will the passenger travel with a guide dog? Yes No

12. Does the passenger have a hearing impairment? Yes No

If yes, an additional report from a doctor who is an ear, nose and throat specialist must be presented containing an audiometric evaluation.

13. Does the passenger require any special equipment? Yes No

If yes, what equipment?

Signature and stamp of the physician authorized by the patient _____ Date _____