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**Medical certificate for pregnant passenger expecting twins,  
travelling 12-8 weeks before delivery**

**Passenger name:**

**Reservation number:**

**Name and phone number of treating doctor:**

**Doctors signature and date:**

**Date for expected delivery and week of pregnancy:**

**NB!** If expecting more than one baby or if travel time exceeds more than 4 hours please contact SAS Medical Sales for further instructions. Certificate must not be more than 10 days old.

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