ELITE LIMOUSINES

TRAVEL AGENT REGISTRATION

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PLEASE COMPLETE THIS FORM IN BLOCK LETTERS

We the undersigned, apply to become a Registered Travel Agency

Date:		Signature of the	company:		
A – Company informatio	n				
Company name:					
Name and position of designated contact in your company:					
Address:					
Zip code	Town		State		
Country Web site					
Fax:					
Main e-mail :					
B – Professional information					
We are predominantly dealing with : Outgoing travel Outgoing travel ····································					
List from 1 to 5, in order of importance, your five main activities:					
Cruises	Domestic tours	Coach travel	Railways	Hotels	
Cultural heritage tours	□ Sports tours	☐ Wildlife, safaris	Car hire	Meetings, congresses	
Charters	Other (specify)				
Further details to be given by travel agencies:					
Please name associations or organisations of which you are a member and specify year of registration:					
Holder of professional licence n°		Date of issue:			
Is the agency approved by IA	TA? IAT <i>I</i>	۸ n°	C	Date	

C – Conditions of Payment

Any amounts quoted by our Booking Office are net to Elite Limousines and Bank charges are to be borne by the members.

In case of difficulty kindly contact Elite Limousines secretariat.

By credit card:	Visa, Mastercard	American Express			
Holder's name:					
Card number (16 digits):					
CV2 Number:					
Valid until://					
	Card holder's signature:				

✓ By Bank Transfer: to be addressed to "Elite Limousines... SWIFT....ABI...CAB....address"

Please complete and send this form by mail to: bookings@elitelimousines.it

Important notice: the information provided under B above might be displayed on the Elite Limousines website and membership roster unless otherwise instructed. If you do not want this information to be displayed, please tick this box: