



**IAAI**

***THE IATA AGENTS ASSOCIATION OF INDIA***

Application Form

For

Associate Membership

Name of Applicant : \_\_\_\_\_

Proposed By : \_\_\_\_\_

Seconded By : \_\_\_\_\_

Registration No:		Date:	
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# DECLARATION

The President  
The IATA Agents Association of India  
Cochin - 682 016

Dear Sir,

We, \_\_\_\_\_

hereby apply for Associate membership of your Association

1. We accept the obligation to abide by the rules and regulation of The IATA Agents Association of India as incorporated in the Memorandum of Association and the Articles of Association and Byelaws of the Association as applicable and in force.
2. We affirm our loyalty to the IAAI and assure our involvement in the activities of IAAI to improve the benefits to the IATA agents and the society at large.
3. We undertake to keep IAAI informed of any default of payment to BSP, misappropriation by staff or financial liabilities.
4. We undertake to settle all dues to the Association immediately on receipt of invoices.
5. We will respond to the Association's request for any information or data promptly.
6. We agree and undertake to intimate the Association, any change in our Company's Corporate structure, name, constitution or ownership within 30 days of such change.

Yours truly,

Name : \_\_\_\_\_

Designation : \_\_\_\_\_

Date : \_\_\_\_\_ Signature & Seal: \_\_\_\_\_

## APPLICATION FORM

1. Name of Applicant Firm / Company	
2. Trade Name (if different from above)	
3. Date of Incorporation	
4. Type of Ownership	Proprietorship / Partnership / Pvt Ltd / Ltd
5. Registered Office Address	
6. Telephone Numbers (with city code)	
7. Office Email	
8. Website	
9. Head Office Address	
10. IATA Accreditation Code	
11. Sales Turnover (Previous Year)	(Year            )
12. Company Income Tax PAN	
13. Company GST Number	
14. Office Premises	Owned / Rented, Area _____ Sq Ft

15. Name of your two authorized representatives	
Name:	Name:
Designation:	Designation:
Mobile No:	Mobile No:
Email:	Email:
16. Staff Strength	
17. GDS / CRS used	
18. Is your Firm/Company member of any other trade association i.e. (if yes, please attach copy of the latest certificate)	
IATO / OTOAI / TAAI / TAFI / ADTOI/ ETAA / ASTA / PATA / (Other) _____	
19. Does your company organize tours?	YES / NO
If YES	Inbound / Outbound

We hereby certify that the information given above is true, correct and accurate to the best of our knowledge and belief and that no information that may be relevant to the above questions has been suppressed or withheld.

**Admission Membership Fee / Annual Subscription Fee**

(VALIDITY PERIOD OF MEMBERSHIP – 01 JANUARY TO 31 DECEMBER)

Admission Fee (Includes First Year Annual Subscription)		
Amount	GST	Total (INR)
3400	612	4012
Annual Renewal Subscription		
Amount	GST	Total (INR)
2400	432	2832

We enclose here with Cheque / DD No \_\_\_\_\_ for Rs. \_\_\_\_\_  
(Rupees \_\_\_\_\_)

in favour of “The IATA Agents Association of India”

Name:

Signature & Seal

Designation:

Date:

## Recommendation by two IAAI Active Members

We hereby propose & recommend the above applicant for Associate Membership of IAAI.

PROPOSER		SECONDER	
Membership No		Membership No	
Name		Name	
Agency		Agency	
Signature & Seal		Signature & Seal	
Date		Date	

### For Office Use

#### State Committee:

Application scrutinized / recommended by

President / Secretary :

Signature & Seal :

Date :

#### Central Secretariat:

Approved by President / General Secretary:

Signature & Seal:

Registration No Allotted:		Date:	
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## **THE IATA AGENTS ASSOCIATION OF INDIA**

IAAI Bhavan, 39/4012, Karimpatta Road, Pallimukku, Cochin - 682 016, India.

Tel. : 0484 3117789 / 4022205 Fax : 0484 4022205 Email: secretariat@iaai.in

[WWW.IAAI.IN](http://WWW.IAAI.IN)