

THE IATA AGENTS ASSOCIATION OF INDIA

Application Form

For

Trade Partner Membership

Name of Applicant:	:		
Proposed By :	: 		
Seconded By	: 		
Registration No:		Date:	

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. Branch Address (If Any)	
10. Primary Line of Business	
11. Sales Turnover (Previous Year)	(Year)
12. Company Income Tax PAN	
13. Company GST Number	
14. Office Premises	Owned / Rented, AreaSq Ft

Name of your two authorized	representati	ives	
Name:		Name:	
Designation:		Designation:	
Mobile No:		Mobile No:	
Email:		Email:	
Staff Strength			
GDS / CRS used			
Is your Firm/Company member attach copy of the latest certi IATO / OTOAI / TAAI / TAFI / A	ficate)	er trade association i.e. (if yes, please / ASTA / PATA / (Other)	
Does your company organize		YES / NO	
If YES		Inbound / Outbound	
	•	e / Annual Subscription Fee	
Admission Fee (Includes First	Year Annual	Subscription)	
Amount		ST Total (INR)	
2900	52	22 3422	
Annual Renewal Subscription			
Amount 2400		ST Total (INR) 32 2832	
We enclose here with Cheque	/ DD No	for Rs)	
Name:		Signature & Seal	
Designation:		Date:	

Recommendation by two IAAI Members (One must be an Active Member)

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

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

For Office Use

Application scrutinized / recommended	by
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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

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