



UFTAA MEMBERSHIP APPLICATION

CATEGORY:ASSOCIATION
(Travel; Tourism; Hospitality; Transport etc)

Please specify Number of Members in the Applicant's Association:

Full name of Association :

Year of Establishment :

Country where the main office is Located :

Is your Association involved with Travel & Tourism Activity : Yes / No

Main Area of your Associations Activity (Choose from options available on Membership Page)

Association's Address :

Pin Code

State

Country

Phones: Code Number(s) :

Fax

E-mail :

Website

Name Association(s) - Regional/Global – of which your Association is a member

Are your Members operating Authorized Training Centers (Affiliated/Accredited with IATA or others): Yes/No

Administrative / Officer Details

Name of President / Chairman / Head (please underline family name) :

Designation :

Mobile

Email :

Skype

Other (Specify)

Other Officers (Secretary General / CEO / Vice President / Authorized representatives for UFTAA)

Main Contact Person for all Communications: Name

Designation :

Mobile

Email :

Skype

Other (Specify)

Second Contact Person for all Communications: Name

Designation :

Mobile

Email :

Skype

Other (Specify)

Any other information about your Association you may desire to add