

**PHILIPPINE TRAVEL AGENCIES ASSOCIATION
MEMBERSHIP APPLICATION FORM 2016**

REGULAR

FILE NO. | R | E | - | | |

NAME OF COMPANY: _____ **HEAD OFFICE :** _____ **BRANCH OFFICE:** _____

ADDRESS:

<p>E-MAIL: (personal / office)</p> <p><input type="checkbox"/> Okay to publish personal e-mail address <input type="checkbox"/> Not to publish</p> <p>WEBSITE:</p>	<p>TELEPHONE(S): (with area code)</p> <p>MOBILE NUMBER(S): (personal / office)</p> <p><input type="checkbox"/> Okay to publish personal mobile number (s) <input type="checkbox"/> Not to publish</p> <p>FAX: (with area code)</p>
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Date Established/Incorporated: _____ DOT Accreditation (if any): _____

LGU License No.: _____ IATA Code No. (If any): _____

TYPE OF OWNERSHIP: Corporation Partnership Single Proprietorship

SERVICES OFFERED:

WHOLESALER INBOUND TICKETING ONLY TRANSPORT OPERATOR

RETAILER OUTBOUND LOCAL TOUR OPERATOR

MEMBERSHIP IN OTHER TOURISM ASSOCIATIONS:

AFTA PATA PIATA SKAL MNL QCTAA

ASTA PATTO NAITAS TPB OTHERS: _____

HRAP PHILTOA SKAL MKT WIT

REPRESENTATIVES:	NAME	DESIGNATION
OFFICIAL:	_____	_____
ALTERNATE:	_____	_____

KEY COMPANY OFFICIALS: (use separate sheet if necessary)

NAME	DESIGNATION
_____	_____
_____	_____

Oath of Undertaking

We hereby certify that all the above information are true and correct to the best of our knowledge. We further certify that our company's stockholders are of good credit standing. We fully understand that any false information given above can be grounds for rejection of our application for membership or expulsion from PTAA. We are also aware that these information will be circulated to the general membership of the Association. In case our application is denied, PTAA is not obliged to give reason for the denial. If accepted, we will abide by the PTAA By-Laws, Code of Ethics, and Inter-Agency Standard Policies and Rules & Regulations as may be promulgated by the Association.

_____ _____ _____

Signature over printed name of OR Signature over printed name of AR Date Accomplished

- REQUIREMENTS FOR REGULAR MEMBERSHIP APPLICATION**
1. Two (2) copies of duly accomplished Application Form
 2. Formal letter of application on company letterhead stating the purpose of joining the Association.
 3. Bio-data, photo and business cards of Official and Alternate Representatives (Official Representative should hold a position of responsibility including but not limited to the position of either President, Chief Executive Officer, Chief Operating Officer, Managing Director, Executive Vice-President, Proprietor, Principal, General-Manager, and Country Manager).
 4. Must be in operation for at least one (1) year.
 5. Certificate of Training/Seminars on Travel Management Course/Basic Ticketing, accredited by DOT, of the Official Representative (should have at least 2 solid years of experience in the travel industry).
 6. Two (2) Sponsorship letter from REGULAR PTAA Member; one (1) of which should be from an IATA accredited PTAA member.
 7. Photocopy of valid LGU license registered as a TRAVEL AGENCY. (Business Permit)
 8. Photocopy of Articles of Incorporation and By-Laws (for corporations and partnership) or DTI Business Registration and Certification with Application Form (for single proprietorship). Applicants from Metro Manila and First Class Cities from provinces shall be required to have a minimum paid-up capital of **Php500,000.00**. Applicants from all other cities shall have a minimum paid-up capital of Php 300,000.00 and an additional requirement of an endorsement from their respective local government units. The main business of the company should be travel related.
 9. Photocopy of latest SEC General Information Sheet (for Corporations); Latest ITR, AFS and Bank Certificate (for Single Proprietorship)
 10. Photocopy of Board Resolution stating the name of authorized person(s) to sign in behalf of the Company when dealing with government agencies and the PTAA, as submitted to LGU .
 11. List of the Names of the Organizations/Businesses/ Suppliers with whom you are currently engaged in business
 12. List of Company Employees, Address, Position and Date of Employment (at least minimum of three (3) full time employees)
 13. Latest 3 months latest receiving copy of Proof of Employees Contribution each for SSS, Philhealth and PAG-IBIG
 14. Photo of Exterior & Interior of Office (Office Location must be in Commercial Area or in the Commercial Section of a Residential Area. Must have a minimum office space of 30 sq.m.). Office of Travel Agency should be detached or independent from the residence of the owner.
 15. Non – Refundable Application Fee of **Php1,200.00**
 16. Monthly pro-rated Annual Dues of **Php 8, 000.00** and **Php 4, 000.00** for **Manila** and **Provincial** respectively prior to induction. However, for Provincial – General Membership Meeting (GMM) attendance meal will be charged accordingly.
- NOTE : BRING ALL ORIGINAL DOCUMENTS UPON SUBMISSION OF REQUIREMENTS.**

OFFICE USE ONLY		
Received with complete requirements by:	Endorsed/Approved by:	Date
	Ocular Inspection by:	
Receipt no.:	Membership Committee Chair:	
Issued by:	VP-Administration:	
Date:	Board of Trustees:	

