

Membership Type:

General Associate Overseas Allied

01. Name of Organization :

02. Address :

City : Area Code : Country :

03. Type of Organization : Proprietorship Partnership Limited Company

04. Name of Applicant : Designation :

04/a. Date of Birth:..... 04/b. Date of Anniversary:..... 04/c. Blood Group:

05. Name of Representative (if any) : Designation :

06. Contact Details: Land Phone : Fax : Mobile :

E-mail : Website :

Social Media(s):.....

07. (a) Type of Business Operation: Domestic Inbound Outbound

(b) Operational Experience :

Year	No. of Groups	Domestic	Inbound	Outbound	Total

08. Number of Staff :

09. Area of Services : [Please tick the appropriate box(s)] Transfers Hotel Reservation City Tour
 River Cruise Excursion Trekking Package Tour Jungle Safari MICE Car Hire
 Ticketing Visa Processing Hajj/Umrah Others (Specify)

10. If owing any of the following property :
 Transport Cruise Vessel Hotel / Resort Others (Specify).....

11. Promotional Materials : Brochures Posters Others (Specify).....

12. Enclosed : 2copies of Applicant's PP_(35mm x 45mm) TIN Certificate Trade Licence A/C Payee Cheque/Pay order
of Tk. (non-refundable) to be deposited in favour of **Tour Operators Association of Bangladesh.**

13. Affiliations (if any) :

I / We do hereby declare and affirm that the information provided above are true and correct. I/We will abide by the rules and regulations of the Association. I/We agree to timely pay all the prescribed fees and subscriptions as a General / Associate / Overseas Allied Member of the Association.

Recommended by :

.....
Signature of the Applicant
(Seal with Designation)

Date :

Approved by

.....
Membership Sub-Committee

.....
Executive Committee