



## MEMBERSHIP APPLICATION FORM

Year of  
January 1 through December 31, 2006

**Category 1: Corporate Membership Dues (per company) \$300.00**

**Category 2: Multi-line Company Representative Corporate Membership Dues: \$500.00**  
(circle one)

Any government Tourist office, corporation or company actively engaged in the travel trade industry that is interested in promotion travel and tourism to Africa. Only one person may be 'designated' as the Member to receiving mailings and other information. All other employees must be Associate members in their own right to enjoy the APTA benefits.

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**Please make payment payable to APTA, complete application and return to:**

APTA c/o Paul Swart  
2041 N.W. West Hills Ave., Bend, OR 97701  
Phone: (541) 388-7575 Fax: (541) 388-2327 Email: corporate@apta.biz

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

Position: \_\_\_\_\_

Company: \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

Toll free number (USA only) \_\_\_\_\_

Email: \_\_\_\_\_

Web: \_\_\_\_\_

Travel Industry Affiliations: ASTA ARTA PATA CLIA OTHER: \_\_\_\_\_

Applicant's signature: \_\_\_\_\_



## CORPORATE MEMBERS PROFILE

**Please complete and return to: Paul Swart, Corporate & Associate membership chair**

Company \_\_\_\_\_

Address: \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Contact person: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Website URL: http://www. \_\_\_\_\_

How many years selling Africa: \_\_\_\_\_

Describe your Company (25 words): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Countries, Or Products - Promoted: \_\_\_\_\_

List countries or services that are your company specialty: \_\_\_\_\_

Airlines - contract or net rates: \_\_\_\_\_

Agent Commissions: Incentive programs \_\_\_\_\_

Associations/Memberships: \_\_\_\_\_

Sales Tools available for agents: \_\_\_\_\_

Office Hours: \_\_\_\_\_