

Application International Membership

Name of company Address Phone Fax E-Mail Homepage		
Preferred date of joining		
Surname(s), First name(s) Date(s) of birth of the Owner /CEO		
Contact person Date of birth		
Date of foundation / merger	on:	in:
Ltd., Inc., Shareholder/s		
Annual membership fee	320,00€	
How did you become aware of the asr Federal Association r.a.?	      personal recommendation of _____ press fair asr Homepage asr facebook page Other: _____	
What are your expectations of the membership at the asr Federal Association r.a.?		



The asr is as strong as its members! How would you like to support the association's work?	
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The statutes and regulations of membership fees are available in German and will be forwarded upon request.

Date

Company stamp and signature

Questionnaire to application form

Please fill in with block letters. Please keep the correct spelling of your company name in mind.
For further affiliates or offices please copy this questionnaire.

Please mark the correct with a cross and fill in.



Main Office

Complete name of the company:



Affiliate

Address:

Telephone:

Fax:

Office manager:

Type of company



travel agency



tour operator



other:

Entry in companies' register / business registration

Company foundation or take over on:

Date of business registration or Entry in companies' register:

Nr. of Entry:

Please send a copy of the business registration or the entry in the companies' register.

Employees:

There from trained Travel Agents:

There from trainees:



Destinations:

Type of Travel:



direct selling



product selling through other travel
agencies



Incoming Agency



Ticket Consolidator

Main focus of tourism activity / Specialization

Other branches of business (e.g. consultancy, Education ...)
