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APPLICATION FOR ASSOCIATE MEMBERSHIP

PLEASE PRINT LEGIBLY

Company _____

Address _____

Telephone _____ Fax _____

Website _____ E-mail _____

Owner/General Manager _____

Date of commencement of operation (Year) _____

Brief description of activities _____

(Advertisement positions are allocated according to available space. There are two possibilities, company logo without link to website, Company banner on both Central and regional websites with link to own website.)

Membership fee: 250,00 € (215,00 £) (*)

Membership fee full option: 350,00 € or (300,00 £) (**)

(*) This includes the company logo, without link on our Central IATM website

(**) This includes the company banner, on Central and Regional IATM website with link to own Company website

Please send us your Logo or banner for publication on the website.

Contact person for Tour Managers _____

Proposer (IATM Member) _____

Name of Applicant _____ Position _____

Signed _____ Date _____

**This application will be processed by the IATM Board of Directors and Allied Counsellor.
Applicants may not attend any AGM/Congress and/or Regional meetings
until their application has been approved.**

PLEASE DO NOT SEND PAYMENT UNTIL INVOICED

