

APPLICATION FOR FULL MEMBERSHIP

IMPORTANT: The CATO Constitution should be consulted prior to completing this Application for Membership. Forms should be completed in full and be submitted to the Chairman of CATO, together with a copy of your current colour brochure/s. The following criteria must be met: a) your company is a licenced tour operator/travel agent; b) produces annually at least one colour brochure which must be published or distributed electronically; c) your primary source of distribution is via the retail travel agent; d) you are covered by Professional Indemnity Insurance.

**NAME OF COMPANY/
ORGANISATION** _____

TRADING AS _____

Travel Agents Licence Number _____

Hereby applies for Full Membership of the Council of Australian Tour Operators Incorporated. The Applicant acknowledges that it has received the Code of Ethics of CATO and agrees, on being accepted as a member of the Council, to abide by the Code of Ethics.

Managing Director/Chief Executive: _____

The Applicant nominates the senior executive whose name is specified below as its representative to exercise on its behalf its rights and powers as a full member of the Council until further notice.

Address _____

Postcode _____ P.O. Box _____

Telephone _____ Area Code _____ Fax _____ Area Code _____

Email _____ Web Site _____

Nominated Representative _____ Title _____

Personal Email _____ Personal Phone _____

Professional Indemnity Insurance Policy No. _____

Insurance Company _____ Date of expiry ____ / ____ / ____

Government Licence No: _____

Credit Card Payment

Please complete the following details

Name: _____

Company: _____

Address: _____

Tel: No.: _____

Email: _____

PAYMENT AUTHORITY

Please debit my

Amex Visa Diners Mastercard Bankcard

Card Number:

Expiry Date:

Cardholders Name:

Total Amount:

Signature of Cardholder:

** An additional 1% credit card service fee will be applied to the dollar amount paid by credit or charge card.