



TANZANIA ASSOCIATION OF TOUR OPERATORS AFFILIATE MEMBERSHIP APPLICATION

Company Name		
Type of Business		
	Head Office	Branch Office
Post Office Box		
Street Address		
Town/City		
Telephone Numbers		
Website		
E-Mail		
Information on Owners, Directors and top Management	Name	Position
1.		
2.		
3.		
Permits & Licenses certificates	Class/Type	
BRELA Registration Number		
TIN Number		
Business License		
Tax Clearance		
<p><i>Photocopies of all documents together with a filled out membership application form, must be submitted to TATO office physically or through tato@cybernet.co.tz / info@tatotz.org</i></p>		

TANZANIA ASSOCIATION OF TOUR OPERATORS

MEMBERSHIP APPLICATION - Page 2

About Your Company			
What type of business is your company doing?	<div>.....</div> <div>.....</div> <div>.....</div>		
What types of activities do you offer?	<div>.....</div> <div>.....</div> <div>.....</div>		
How do you market your business?	<div>.....</div> <div>.....</div> <div>.....</div>		
Where does your company operate?	<div>.....</div> <div>.....</div> <div>.....</div>		
How many employees do you have?	Tanzanians:	Others:	

I/We hereby certify that the information given above is correct and true to the best of my/our knowledge and that I/We shall support the Association and abide by its constitution, rules, Code of Conduct and ***commit ourselves that will be willing to share information with the Association whenever need arise.***

Date

Signature & Stamp

OFFICE USE ONLY:

CHECKED BY:

_____	_____	_____
Name	Signature	Date

Membership approved/rejected this _____ day of _____, _____

Executive Director: _____