



# Tour Supplier Membership Application

## Requirements for NTA Tour Supplier Membership

All applicants must meet and/or submit the following requirements for membership. See [www.NTAonline.com](http://www.NTAonline.com) for specific description of requirements.

- Be engaged in the business of marketing or providing packaged travel components.
- Be in compliance with applicable laws, rules, regulations and is properly licensed to do business.
- Can be for-profit or non-profit.

## Important Information and Dates:

- Upon approval of your membership application, membership dues become non-refundable.
- Membership is held by the member company, not an individual representative.
- Membership is based on a calendar year. Applicants joining after July 1<sup>st</sup> can select an expiration date of the current year, or in the subsequent year.
- Applications must be received with all required documentation and payment prior to the last working day in *February* to be listed in NTA's printed *Membership Directory*.
- Business appointments may be offered at NTA's Annual Convention and other events, however, the payment of membership dues are not contingent on the scheduling of appointments and therefore, a refund of membership dues will not be given to those companies who do not receive appointments.

## What prompted you to join NTA? (Check all that apply.)

- Publication – please name: \_\_\_\_\_
- Industry colleague – name: \_\_\_\_\_ Company: \_\_\_\_\_
- Guest program – location: \_\_\_\_\_
- Website ([www.NTAonline.com](http://www.NTAonline.com))
- Met NTA representative at trade show – name of show: \_\_\_\_\_
- NTA solicitation by mail, fax, phone, or e-mail
- Other \_\_\_\_\_

## General Information (Please type or print.)

- Company Name: \_\_\_\_\_
- Primary Contact: 'Mr.' Ms. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_
- Title: \_\_\_\_\_
- Address: \_\_\_\_\_
- City: \_\_\_\_\_ State/Province/Country: \_\_\_\_\_ Postal Code: \_\_\_\_\_
- Telephone: \_\_\_\_\_ Toll Free: \_\_\_\_\_ Fax: \_\_\_\_\_
- Web Address: \_\_\_\_\_ Contact E-mail: \_\_\_\_\_
- Physical address, if different: \_\_\_\_\_
- Identify name(s) of Applicant's CEO/Owner: \_\_\_\_\_
- Provide e-mail address for CEO: \_\_\_\_\_

## Tour Supplier Category (circle one):

- Airline      Casino      Motorcoach      Receptive/Sightseeing      Railroad      Rental Car
- Attraction (type: \_\_\_\_\_) Hotel      Multiple Services      Passenger Vessel      Restaurant

Total number of properties/entities/locations represented by membership: \_\_\_\_\_

A. Are you in compliance with all applicable federal, state, national, provincial or local laws and regulations? (check one) \_\_\_\_\_Yes \_\_\_\_\_No\* \*If NO, provide details on separate sheet.

B. Do you currently have an active petition under the applicable federal, state, national, provincial or local bankruptcy or insolvency laws? (check one) \_\_\_\_\_Yes\* \_\_\_\_\_No \*If YES, provide details on separate sheet.

**NTA Code of Ethics and Professional Responsibility**

NTA's Code of Ethics consists of the following general codes. Each general code has several specific subdivisions, which set forth clarifications and specific principles of the general code (which are too lengthy to be set forth, however, which are incorporated by this reference). The entire NTA Code of Ethics and Professional Responsibility can be found on NTA's Web site ([www.NTAonline.com](http://www.NTAonline.com)).

Preamble: The NTA's Code of Ethics and Professional Responsibility is established to guide its members in their relationship to one another and in providing professional and courteous quality services to the traveling public.

**An NTA Member Shall:**

- Be guided in all professional and personal activities by truth, accuracy, honesty, fairness, and integrity.
- Exercise truth, integrity, and fair dealings with his/her/its customers and/or consumers.
- Promote public confidence in NTA.
- Keep informed on the latest techniques, developments, and knowledge pertinent to the packaged travel industry.

**Sign and Return to NTA Headquarters**

Applicant, by its duly authorized representative, hereby declares that the statements contained in this form are true and correct and that Applicant has not suppressed or misstated any facts, or omitted to state any facts necessary to make the statements set forth herein not misleading. Applicant, by its duly authorized representative, acknowledges and is aware that to knowingly give misinformation or false information is to commit fraud, which is in direct conflict with the NTA's Code of Ethics and Professional Responsibility.

Applicant understands the requirements of NTA Membership and agrees to support the ideas of NTA, its bylaws and Code of Ethics and Professional Responsibility.

\_\_\_\_\_  
Signature of Authorized Representative of Applicant

\_\_\_\_\_  
Title

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

**Level of Membership and Payment Authorization**

<b>Individual Tour Supplier representing 1 property</b>			
<b>Select your preferred membership term</b>	<b>Date of Application</b>	<b>Membership Expiration</b>	<b>Fee</b>
<input type="checkbox"/>	Nov. 1, 2009 through June 30, 2010	December 31, 2010	US\$625
<input type="checkbox"/>	July 1, 2010 through Oct. 31, 2010	December 31, 2010	US\$470
<input type="checkbox"/>	July 1, 2010 through Oct. 31, 2010	December 31, 2011	US\$930
<b>Tour Supplier representing 2-25 properties</b>			
<input type="checkbox"/>	Nov. 1, 2009 through June 30, 2010	December 31, 2010	US\$975
<input type="checkbox"/>	July 1, 2010 through Oct. 31, 2010	December 31, 2010	US\$740
<input type="checkbox"/>	July 1, 2010 through Oct. 31, 2010	December 31, 2011	US\$1465
<b>Tour Supplier representing 26 or more properties</b>			
<input type="checkbox"/>	Nov. 1, 2009 through June 30, 2010	December 31, 2010	US\$1,700
<input type="checkbox"/>	July 1, 2010 through Oct. 31, 2010	December 31, 2010	US\$1,275
<input type="checkbox"/>	July 1, 2010 through Oct. 31, 2010	December 31, 2011	US\$2,550

**Dues amounts listed above are valid for 2010**

**Total Amount Due \$ \_\_\_\_\_**

- Check/money order is enclosed.
- Charge this NTA membership to my (circle one):    Discover      Visa      American Express      MasterCard

Card Number: \_\_\_\_\_ Exp: \_\_\_\_/\_\_\_\_ Name on Card \_\_\_\_\_

Billing address for credit card: \_\_\_\_\_ City: \_\_\_\_\_

State/Province/Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

**Return completed application and payment to:  
 National Tour Association • Attn: Membership Development • 546 E. Main St. • Lexington, KY 40508 USA  
 800.682.8886 (USA and Canada) • +1.859.226.4444 • +1.859.226.4414 fax • www.NTAonline.com**