



Association of Greek Cypriot Travel Agents - AGTA (UK)
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AGTA (UK) MEMBERSHIP APPLICATION FORM

Name of Company
Date of establishment

Category: Full / Affiliate / Sponsor

Full address

Telephone

Fax

E. Mail

Web site

Applicant's signature

New member's principal / directors' names

.....

Member's contact name for AGTA matters

Date applied for membership

Additional information (describe your company's / organisation's business nature)

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.....
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{Note: Application forms should be completed and returned to the Secretariat accompanied with appropriate subscription fees (apply to the Secretariat for correct amounts, if not certain). Address details as shown above - cheques payable to AGTA (UK)}.

For AGTA office use only:

Proposed by: 1. Name Company

2. Name Company

Seconded by: 1. Name Company

Seconded by 2. Name Company

Date council confirmed membership:
