



# 2017-18 SIGB Travel Membership Application

All relevant sections of this application form must be completed and returned to the SIGB with your completed direct debit form. All applications will be considered by the SIGB Committee and, immediately following ratification, membership details will be forwarded. The membership year runs from 1 May to 30 April.

**We, the undersigned, wish to apply for Travel Membership of Snowsport Industries of Great Britain (SIGB):**

- We understand that in order to qualify for membership-
1. We must operate a commercially viable business in the retailing of snowsport travel product in Great Britain.
  2. We must have been involved in the Snowsport Trade for a minimum of one year.
  3. We must enclose a direct debit mandate for the annual subscription payment.
  4. We agree that, if we are admitted to SIGB, we will abide by the rules of the constitution.

**Signed**

**Print Name**

**Date**

**Annual membership fee** **£50**

**Direct Debit mandate enclosed**

## Travel Section Categories

1. Specialist Travel Agent
2. Tour Operator offering:
  - Hotel holidays
  - Chalet holidays
  - Group holiday specialist
  - Schools holiday specialist
  - Learn to ski/board packages
  - Self drive holidays only
  - Coach holidays
3. Airline
4. Ferry Company
5. Tourist Office
6. Ski/Board school or courses
7. Other Travel

### **1. Contact** Responsible for overseeing your company's membership of SIGB, distribution of SIGB information to appropriate staff etc.

**Contact Name**

**Position**

### **2. Company Information**

**Company Name**

Note that you must have the legal right to use this name.

**Trading As Name**

This name will be your company's official membership name and will be used in all SIGB member listings (i.e website, etc)

**Address**

<b>Tel no.</b> <input type="text"/>	<b>Fax no.</b> <input type="text"/>
<b>Email</b> <input type="text"/>	<b>Web site</b> <input type="text"/>
<b>ABTA no.</b> <input type="text"/>	<b>ATOL no.</b> <input type="text"/>

**Type of Business** Sole Trader  Partnership  Limited Company  No. of years in Snowsport Business

**3. Referees** If you have already provided your ABTA number you do not need to supply referees. If you are not a member of ABTA you must provide the names of two SIGB Full Member referees who are willing to support your application. If you are not a member of ABTA and cannot provide referees, please enclose a letter giving details of your company background for consideration by the SIGB Committee.

**Proposer**  **Company**

**Seconded**  **Company**

- Completed application form together with completed direct debit mandate should be sent to: SIGB, 3 Coalhill, The Shore, Edinburgh, EH6 6RH.
- If you have any queries on the application process please contact the SIGB office. Tel: 0131 555 3820 Fax: 0131 553 7488 Email: sigb@raremanagement.co.uk

**Office Use:** Direct Debit  Referees Check  Date accepted \_\_\_\_\_