

TRAVEL AGENT SUPPLEMENT

APPLICANT'S INSTRUCTIONS:

- 1. Answer all questions. If the answer requires detail, please attach a separate sheet.
- 2. Application must be signed and dated by owner, partner or officer.
- 3. PLEASE READ CAREFULLY THE STATEMENTS AT THE END OF THIS APPLICATION.
(PLEASE TYPE OR PRINT IN INK)

1. TOURS

a. Do you: arrange them; or buy them from another agent? (Check one)

b. Are there student tours? Yes No

If Yes:

(i) Who provides supervision? _____

(ii) Are hold harmless agreements signed? Yes No

c. Are the tours foreign; or domestic?

If foreign, please list the countries where tours take place: _____

2. ASSOCIATIONS

a. Please list any professional or organizations of which you are a member:

b. Circle conferences in which you hold appointments:

ATC IATA IPSA IPPC ASTA AMTRAK Other (Specify): _____

3. FEES & RECEIPTS

a. Estimated Fees & Receipts for new policy year: \$ _____

b. Estimated Commissions for new policy year: \$ _____

I understand information submitted herein becomes a part of my Application and is subject to the same representation and conditions.

Name of Applicant*

Title (Officer, partner, etc.)

Signature of Applicant

Date

One signed copy will be attached to the policy, cover note or certificate, if issued.

*Signing this form does not bind the applicant or the Company or the Underwriting Manager to complete the insurance.