

**CREDIT GUARANTEE PROGRAM FOR IATA PASSENGER SALES AGENTS  
AND DAPA AGENTS PARTICIPATING IN THE BILLING SETTLEMENT PLAN (BSP) – AUSTRALIA  
REGISTRATION FORM**

I/We make application to participate in the above scheme managed by Contractors Bonding Limited (Insurer)

<b>DETAILS OF APPLICANT:</b>		
Agent Name (Full Legal Entity):		
Trading Name (if different from Agent Name):		
IATA Agent Numeric Code:	ACN No:	ABN No:
Agent Address		
		PO Box No:
Tel:	Fax:	Email:

<b>DECLARATION:</b>	
Estimated annual ticket sales through BSP-Australia: AU \$	Total amount of cover required by IATA: AU \$
<input type="checkbox"/> We are currently covered under another IATA scheme to the value of AU\$ _____ (this is in addition to that cover)	
<input type="checkbox"/> We are NOT currently covered under the CBL IATA scheme (this is a request for a NEW cover)	
<input type="checkbox"/> We are currently covered under the CBL IATA scheme in the amount of AU\$ _____	
We now require our <b>TOTAL COVER</b> to IATA to be in the cover of AU\$ _____	
Requested <b>COMMENCEMENT DATE</b> for guarantee cover: _____ (enter date)	
I, _____ ( <b>print full name</b> ) being a Director / Partner / Shareholder / Sole Trader* of _____ the APPLICANT, an IATA approved agency hereby declare that: (*delete as appropriate)	
a) I have no reason to doubt that the Applicant will be able to comply with its obligations. b) To the best of my knowledge, information, belief and after due careful enquiry, the information contained herein is correct. c) I am not aware of any circumstances, which I have not disclosed to you which might influence you and/or your principals' acceptance of the risk. d) In the event of you issuing the guarantee applied for the Applicant will, during the period of your liability upon your request, immediately make available to you and allow you to examine or take copies of any accounts or other documents in its possession relating to its own, and any Holding and/or Subsidiary Company's financial affairs. e) I am duly authorised by the Applicant to complete this form on its behalf and to make this declaration on its behalf.	

**TO THE INSURER:**

The Applicant and I hereby agree to indemnify you against all actions, proceedings, claims and demands which may be brought against you or your principals and all payments, liabilities, losses, damages, costs and expenses of whatsoever nature which you may suffer, incur or sustain were such is caused by or arises from or relates to any consideration furnished by you to cover IATA against any or all financial losses occasioned to it by the Applicant participating in the Credit Guarantee Program for BSP-Australia Agents. The IATA BSP Office is hereby authorised to provide the Insurer or representatives upon request and on a confidential basis such information relating to the Applicant's BSP transactions as may be required by the Insurer from time to time for guarantee replacement fee assessment/adjustment purposes.

<b>SIGNED FOR AND ON BEHALF OF THE APPLICANT:</b>
Signed: _____
Dated: _____

<b>SIGNED BY THE DIRECTOR / SHAREHOLDER / PARTNER / SOLE TRADER:</b>
Signed: _____
Dated: _____
<b>(This must be signed by BOTH the Applicant/Trader AND the Director / Partner / Shareholder / Sole Trader)</b>

- |   |
|---|
| <b>THE APPLICATION PROCESS:</b>   |
| <ul style="list-style-type: none"> <li>Return completed and signed Registration Form to Contractors Bonding Limited (CBL) by fax (+64 9300 5046) or email (gsiensen@contractorsbonding.com)</li> <li>Upon receipt, CBL will be in touch with a Tax Invoice/Quotation and payment options</li> <li>Upon receipt of payment, CBL will advise IATA of cover placed with CBL</li> <li>For further assistance call: TollFree 1800 617 457 or <a href="mailto:gsiensen@contractorsbonding.com">gsiensen@contractorsbonding.com</a></li> </ul> |