



Year 2020-2021

Supplier Registration Form

Please note the following:

1. All organisations will be evaluated according to the following requirements and must provide the information required below.
2. Failure to submit any of the documents will result in non-registration.
3. Failure to complete the form and to duly sign will result in disqualification.
4. Some examples of services are listed in the table below:

<u><i>Stays at hotels</i></u>	<u><i>Organisation of excursions</i></u>	<u><i>Abroad tours</i></u>
<i>(i) Pre-booking & reservation (ii) Stay packages (All-inclusive) (iii) Package inclusions (iv) Flexibility in terms of payment</i>	<i>(i) Pre-booking & reservation (ii) Special package and inclusions (iii) Flexibility in terms of payment</i>	<i>(i) Pre-booking & reservation for accommodation (ii) Pre-booking & reservation for excursions (iii) Booking of tickets (airliner) (iv) Package Inclusions (v) Flexibility in terms of payment</i>

1. Hotel Name/ Group of Hotel / Tour Operator/ Travel Agency/ Others:	
2. Registered Address	
3. Telephone Number:	Fax Number:
4. Email address	
5. Name and Title of Company Representative	
6. Hotel Star Rating (Applicable to hotels only)	
7. Business Registration Number (BRN) (Please attach copy of same and tick accordingly)	
<input type="checkbox"/> Submitted	<input type="checkbox"/> Not Submitted
8. VAT Registration Certificate (Please attach copy of same and tick accordingly)	
<input type="checkbox"/> Submitted	<input type="checkbox"/> Not Submitted
9. Registered as small and medium enterprise	
Yes <input type="checkbox"/>	No <input type="checkbox"/>

I certify that all information provided on this form is true and correct. I understand that any incorrect information given in this form can result in disqualification.

All relevant information in this Supplier Registration Form submitted by the Company will be kept confidential.

Name of Authorised Officer:

Designation:

Signature: **Date:**

Company seal:

