

**ASSOCIATION OF
KAILASH TOUR OPERATORS NEPAL
(AKTON)**



MEMBERSHIP FORM

APPLICATION & COMPANY PROFILE

Application

The President
Association of Kailash Tour Operators Nepal
Kathmandu, Nepal

Dear Sir,

We,.....hereby
apply for the ACTIVE/PROVISOINAL /ALLIED membership of AKTON.

1. We hereby take a sacred pledge to remain strictly within the rules and regulations of ASSOCIATION OF KAILASH TOUR OPERATORS NEPAL as enforced from time to time and promise to adhere to the unquestionable ethical standard in carrying out our business without reservation and prevarication of any kind. We note and unhesitatingly accept that any member whose action will be detrimental to or go against the interest of the Association and who shall fail to observe or violate in any way the articles of the Association (or the laws & by-laws of the Association) or violate any of the rules of business conduct or the covenant established by the Association or whose activities in the view of the Executive Committee is not up to the mark or prejudicial to the Association or is detrimental to the interest of the travelling public, may after due verification be either reprimanded, suspended or expelled from the Association by the Executive Committee for which action the Executive Committee shall not be required to give any reason.
2. We won't harm or create disputes among our partners in India or other countries regarding the business deals and offers. We follow the minimum rates and the services committed as per agreed by the association.
3. We deem it as an ethical obligation to help the Association in all possible ways to find out any breach or breaches of such a sacred pledge on the part of any Agent or Agents who may be party to this covenant.
4. We accept it as our bounden duty to inform to the Association any change in our status, constitution and / or corporate name or address or telephone, fax nos. or email by any reason whatsoever within 30 days of any such change that comes into being.

Yours Truly,

Office Seal

Signature
(Name & Designation)

Company Profile

To be filled up by applicant wishing to become ACTIVE / PROVISIONAL / ALLIED
Member of Association of Kailash Tour Operators Nepal

1. Name of the firm _____
2. Full Address _____
Telephone # _____ Fax # _____
E-mail _____ website _____
3. Established on _____
4. Name of the individual who will represent the firm at
AKTON _____
5. Type of Firm : Sole proprietary Concern / Partnership
Firm / A Private Limited Company or Public
Limited Company _____
6. Give the name/s of the proprietors, or the
Partners, or the Director of the Company,
as the case may be
1. _____
2. _____
3. _____
4. _____
5. _____
7. State whether Kailash Manasarovar is
Your Principal business. If not, what is your
Principal business and how long has this
business been established ? _____
8. Give the exact strength of the staff exclusively
engaged in your company. _____
9. If you have branch offices, state their full addresses. _____
10. State if you are the member of any other Association,
Society etc. _____
11. Are you recognized by the Ministry of Tourism, Ministry
of Industry, Govt. of Nepal, If so, since when ? _____
12. Name/s of your Bankers with their full addresses. _____

13. Give the figure of your annual business turnover. _____
14. Give any other details you feel will enable the
Committee to the consider your application for
membership of the Association _____

15. Kailash group operated in past years
(at least one year the company should operated kailash tour). _____
- a. When did you first started your Kailash group from your own Company. _____
- b. Number of group size operated _____
- c. Your associated partner to operate past groups in previous year: _____

Name and signature of the Referral (1) _____

Date : _____ Signature : _____ Stamp of the Company : _____

Name and signature of the Referral (2) _____

Note : The Referral should be Active Member of AKTON

Date : _____ Signature : _____ Stamp of the Company : _____

Active / Provisional / Allied Membership :

Registration Fees:

Annual Subscription:

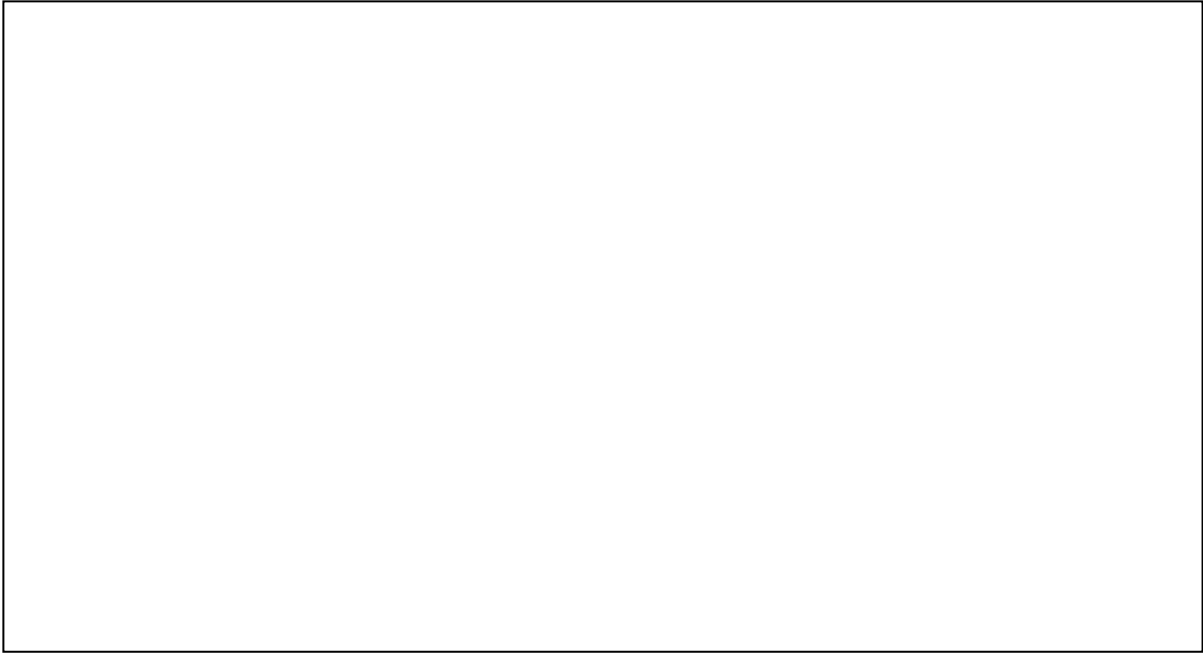
Rs. _____

Rs. _____

I have enclosed following Documents for your Perusal and Record.

- Copy of Citizenship.
- Copy of the Company Registrar.
- Copy of Tourism License.
- Copy of Tax Clearance.
- Copy of TAAN / NATTA certificate.
- Copy of Kailash permit of group operated from your company.

Location Map



Declaration: I hereby declare that the information furnished hereinabove is complete, correct and true to the best of my knowledge and belief. I authorize AKTON to make any enquiries regarding the information declared hereinabove.

Authorized Signature

Name:

Stamp:

FOR OFFICE USE ONLY:

Decision of Executive Committee: **Approved / Not-approved / Postpond**

General Secretary
AKTON Membership Committee

President
AKTON Membership Committee