



Travel Agent Registration Form

Travel Agency Name : _____

Ownership : Sole Partnership
(Tick Relevant option)

Full Address : _____

Email Id : _____

Office Phone No. : _____

Contact Person : _____

Designation : _____

Mobile No. : _____

Date of Birth : _____

Pan Details : _____

Name on Pancard : _____

Pancard No. : _____

Company Seal & Signature : _____

Date : _____

Note:- Fill up the form and send a scanned copy to sales@uaplindia.com. Post completion of the registration, our sales representative will get in touch with you.

