

National Tourism Accreditation Program



REGISTRATION FORM

Complete details below and post or fax together with payment to:

South Australian Tourism Accreditation Board Inc.

GPO Box 1972

ADELAIDE SA 5001

Telephone: (08) 8463 4511

Facsimile: (08) 7421 0275

Registration and annual fees are based on the number of full time equivalent staff, whereby 2 part time or 4 casual staff members equal 1 full time equivalent.

Staff Numbers	Total (Incl. GST)	Please tick appropriate box
1 to 5	\$180.00	
6 to 15	\$330.00	
16 to 50	\$690.00	
51 to 100	\$1020.00	
101+	\$1400.00	

Office use only
<i>Phone registrations only:</i>
Clauses stated on this form have been verbally communicated to the operator.
YES NO

Registered Business Name

Address

Post Code

Telephone (08)

Fax (08)

Email

I accept to receive the quarterly accreditation newsletter and other commercial accreditation information via electronic mail and/or fax from SATAB: please circle YES NO

Website Address

Contact Person

Industry Type (eg B&B, Self Contained, Tour Operator)

Region Of Operation (eg Adelaide, Barossa)

Total Payment (Cheque Or Credit Card – please circle) \$

Credit Card No.

Expiry Date

/

Cardholder Name

Please circle

VISA

MASTERCARD

BANKCARD

I understand that the required fee and details as explained in the documentation provided must be returned as soon as possible to become accredited. The business understands that the registration is valid for one year when it must be renewed. I give SATAB permission to list my business contact details (including telephone/fax number, email & postal address) on the Tourism Accreditation website, www.tourismaccreditation.com.au

Signature

Date

PLEASE RETAIN A COPY OF THIS REGISTRATION FORM FOR YOUR RECORDS, AS ON RECEIPT OF PAYMENT THIS BECOMES A TAX INVOICE. ABN: 64 992 585 804