

The Travel Planner
1113 Lochland Drive
Gallatin, TN 37066
615-826-4335
615-866-5089 fax

APPLICATION FOR INDEPENDENT CONTRACTOR POSITION

Please print completed application and fax to 1-615-966-5089

Name: _____

Home Street Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

E-Mail Address _____ Cell Phone _____

Website address _____

Do you have e-mail access while traveling or out of the office? _____

Do you have a laptop computer? _____ Would you be interested in linking to our website? _____

Are you selling travel full time or part time? _____

What are your other current occupation(s) _____

What past occupations have you had? _____

Have you worked in a full service agency before? _____ How long have you been selling travel? _____

Are you a member of CLIA? _____ Are you a member of OSSN? _____ How long? _____

What other professional travel groups do you belong to? i.e., ASTA, ARTA, NACOA, OSSN, NACTA, PATA, CTO, DEMA, etc. _____

Do you have another "Host" agency partner? _____

Do you have your own business name? _____ How long have you had the name? _____

What is your business name? _____

Do you have a business license? _____ How long? _____

Are you familiar with your state and local travel promoter laws? _____

Do you carry E&O insurance for your travel business? _____

What is the name of the E&O insurance company? _____

If not, do you agree to purchase E&O insurance coverage through our agency at an additional cost of \$161.37 per year for \$1,000,000.00 coverage? _____

What is your niche or specialty? _____

Do you regularly sell to groups? _____

Are you a CTA, CTC, ACC or MCC accredited agent? _____ Which ones? _____

What type of support are you looking for in a host agency? _____

Please feel free to add additional information below:

Signed _____, Applicant Date: _____