

GSA / BUYER PREQUALIFICATION APPLICATION

Name _____ Company Name _____

Street Address _____ City _____

State _____ Zip/Postal Code _____ Country _____

Phone _____ Fax _____

Company E-mail _____ Web Site _____

Job Functions:

Contracting
 Operations
 Product Development
 Other

Which best describes your business?

- | | | |
|--------------------------------------------------|----------------------------------------------------------|--------------------------------------------------|
| <input type="radio"/> Wholesalers/Tour operators | <input type="radio"/> Professional Conference Organizers | <input type="radio"/> Government Sectors |
| <input type="radio"/> Wholesalers/Retailers | <input type="radio"/> Human Resources Companies | <input type="radio"/> Event Management Companies |
| <input type="radio"/> Receptive operators | <input type="radio"/> Travel Managers | <input type="radio"/> Incentive Companies |
| <input type="radio"/> Retailers | <input type="radio"/> Marketing Companies | <input type="radio"/> GSA |
| <input type="radio"/> Corporations | <input type="radio"/> Associations | |

Are you a member of the Visit USA Committee? Yes No

How many passengers did you handle last year?

1,000 - 4,999
 5,000 - 24,999
 25,000 - 49,999
 50,000 - 99,999
 100,000 - 249,999
 250,000 - 499,999
 500,000 - 999,999
 Over 1,000,000

Annual sales volume in US dollars

1,000 - 4,999
 5,000 - 24,999
 25,000 - 49,999
 50,000 - 99,999
 100,000 - 249,999
 250,000 - 499,999
 500,000 - 999,999
 Over 1,000,000

With which air carriers (top three) do you book the majority of your business? _____

Please fax this form back to +1 (305) 860-3233 to Rosadela Arenas' attention.