



Industry Specialist Program

COMPANY INFORMATION

Company Name: _____ Date: _____

Contact Name: _____ Position: _____

Address: _____

Tel: _____ Email: _____ Website: _____

COURSE INFORMATION

Name of Course: _____

Which category is this course designed to teach? (Please check all that apply)

- Attractions Airlines Cruise Lines Hotels & Resorts
 Tour Operators Tourist Boards Insurance Providers
 Other: _____

Number of Modules: _____

Average length to complete: _____

Is a prerequisite required? Yes No Prerequisite: _____

Exam to be taken at course completion? Yes No

Certificate awarded after successful completion? Yes No

Additional benefits for course completion:

Promotional Paragraph: please complete a short paragraph that will be used on the ACTA website to describe your training program.

FEE

Industry Specialist Programs are subject to an annual renewal fee due by **February 28** of the subsequent year.

Fee per course: **\$ 120 + tax** GST or HST as applicable

Please make cheques payable to the **Association of Canadian Travel Agencies**

Visa Master Card American Express

Name on card: _____ Card # _____

Expiry Date: _____ Signature: _____

Return application form and fee to:

ACTA
2560 Matheson Blvd. East, Ste. 226,
Mississauga, ON L4W 4Y9

Telephone (905) 282-9294 ext. 128 Fax (905) 282 9286 E-mail kmurtaza@acta.ca

CHECKLIST (Please have the following attached)

- Company Logo
- Link to the Industry Specialist Program
- Promotional Paragraph

