



ADDITIONAL QUESTIONNAIRE PROFESSIONAL LIABILITY/ERRORS AND OMISSIONS

TRAVEL AGENTS

1. Name of Applicant: _____

2. Do you act as a: (a) Franchisor Yes No
(b) Franchisee Yes No

3. Please indicate your:	<u>Total Annual Sales</u>	<u>Total Annual Commission</u>
(a) Last complete fiscal year:	\$ _____	\$ _____
(b) Current projected fiscal year:	\$ _____	\$ _____

4. Please indicate the approximate percentage of last year's sales derived from:

(a) Airline or other transit	_____ %
(b) Business placed through package tour operators	_____ %
(c) Insurance products (please describe): _____	
(d) Self-prepared tours**	_____ %
(e) Wholesale**	_____ %
(f) Other**	_____ %
	100%

** If you derive income from any of (d), (e), or (f) please attach a detailed description and/or brochures.

5. If you arrange tours, please indicate the approximate percentage of these sales derived from:

(a) Group tours	_____ %
(b) Conventions, seminars, etc.	_____ %
(c) Student/incentive tours	_____ %
(d) Tours of a hazardous nature (e.g. mountain climbing, safaris, deep sea diving, hostile environment, etc.)	_____ %
	100%

6. Does any parent, subsidiary or other affiliated company operate tours? Yes No
If Yes, please provide details:

SIGNED AND DATED this _____ day of _____, _____.

Signature