

## NEW AGENCY APPLICATION

Dear Travel Professional,

Thank you for your interest in selling the following brands:

Apple Vacations  
Blue Sky Tours  
Funjet Vacations  
Southwest Vacations  
TNT Vacations

Travel Impressions  
United Vacations  
VAX Hotels  
VAX Published Air

**Before completing this application, please verify that your agency is not already registered with these suppliers through a host agency or consortia.** If you are an agent working with a host agency or consortia, work directly with your agency to have your VAX login credentials set up. In creating this account number separate from your host agency, you may not have the same benefits or commission levels.

**Please verify that your agency is not already registered with these suppliers before continuing with this application.**

To process your request, we must receive the **completed** New Agency Application and **completed** IRS Form W-9, W-8BEN or W-8BEN-E. The approval process will include verification of the agency profile information in addition to business and financial references. It is very important that this information is accurate or we will be unable to process your application.

In order to approve your account, it is required that your agency has an address within North America and an email address. It will take 5 to 7 business days for a thorough review of your agency to be approved and established in our system. At that time, your agency will be notified via email with the confirmation of account setup.

Upon approval of this application you will be able to sell all of the products listed above. We will accept your client's credit card, certified check or wire transfer of funds as forms of payment. The agency will be held liable for all payments applied to a reservation.

Congratulations on your new business venture. We look forward to working with your agency.

Best Regards,

Travel Agency Administration

# NEW AGENCY APPLICATION

Please complete all information requested on this form.

## TRAVEL AGENCY INFORMATION

Travel Agency Name:

Address:

City-State-Zip Code:

(Area Code) Phone Number:

(Area Code) Fax Number:

Agency E-mail address:

Agency's Internet Web Site (URL):

Owner's Name:

Manager's Name:

ARC Accredited Number (8-digit)\*:

\*If you are not ARC approved, please leave blank. You will be assigned a pseudo ARC number to use when booking our products.

Affiliated consortium:

If you are with a host agency, please provide the name:

## NEW AGENCY APPLICATION TRAVEL INDUSTRY BACKGROUND

How long has the agency been in business?

How long has the owner been in the Travel Industry?

How long has the manager been in the Travel Industry?

Does your agency operate on a full time basis?

Is there a dedicated phone line available for your agency?

Are you an independent or outside agent?

Are you a storefront or home-based agency?

If home-based, do you provide public access to your clients? Please explain:

### PROFESSIONAL REFERENCES: (CONTACT PERSON, COMPANY NAME, AND PHONE NUMBER)

1. \_\_\_\_\_
2. \_\_\_\_\_

### FINANCIAL REFERENCE: (BANK NAME AND ADDRESS)

1. \_\_\_\_\_

# NEW AGENCY APPLICATION AGREEMENT

**You agree to be liable and indemnify us for any and all bookings made, fraudulently or otherwise, using your ARC number or pseudo ARC number whether such bookings are made by you or any of the following including but not limited to outside travel agents, affiliates, employees, independents, consultants and any customers' direct payments made whether the booking was made through your agency or on your agency's affiliate website. In no event shall an Agency offer any discounts, rebates, credits or any similar reductions off of any of ALG Vacations Corp.'s products without the approval of ALG Vacations Corp.**

**Owner's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

# NEW AGENCY APPLICATION

## Form W-9 Request for Taxpayer Identification Number and Certification

**CST 2009218-20**

### **Request for Taxpayer Identification Number and Certification**

**United States Applicants:** In order to comply with Internal Revenue Service requirements for Form W-9 information, we are requesting your federal tax identification number. IRS Code Section 6019, recipients' payments are required to provide federal tax identification numbers to payers. Section 6676 of the Code currently provides for mandatory backup withholding of 31% for failure to give an identification number to a payer.

**Foreign Applicants (i.e., Canadian):** The IRS regulations require us to withhold tax of any payment amount subject to withholding made to a payee that is a foreign person or entity unless the payment can be associated with proper documentation that relieves that obligation. Refer to the IRS rules and regulations and/or your tax advisor to determine proper Forms for your organization. If you are exempt based on your treaty, please include an up-to-date English version of the treaty highlighting which part of the treaty applies.

### **IMPORTANT:**

To complete registration with ALG Vacations Corp. please complete the following:

#### **United States Applicants:**

- Completed [W9 form](#) "Request for Taxpayer Identification Number and Certification"

#### **Foreign Applicants (i.e., Canadian):**

- Completed Form [W-8BEN](#) "Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding (Individuals)"
- Completed Form [W-8BEN-E](#) "Certificate of Status of Beneficial Owner for United States Tax Withholding and Reporting (Entities)"

### **Contact Information**

After completing the New Agency Application and the applicable IRS form, please:

1. Save your documents, print, and fax forms with owner's signature to: 414-934-2910.
2. Or email these documents to Travel Agency Administration: [TravelAgencyAdmin@applelg.net](mailto:TravelAgencyAdmin@applelg.net).

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3. Or mail completed forms to: ALG Vacations Corp.

Attn: Travel Agency Administration

8969 N. Port Washington Road

Milwaukee, WI 53217