



APPLICATION FORM

Yes,

I want to join Priority Pass and enjoy access to over 600 airport VIP lounges the world over

Source: ITP02

Fax To: +44 (0)1753 868197 or e-mail to: ITPenquiries@itptravel.ne
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Family Name	ily NameMr/Mrs/Miss/Ms or Title						
First Name							
Address							
	Zipcode/Postcode						
Country			lationality				
Home telephone (<u>) </u>			Date of Birth / / / Day Month Year			
Business telephone (
e-mail address_							
No. of business flights tal	ken per year	S	ize of Co	mpany 1-50	51-250	251+	
Main destination of flights	UK Euro	rope North Atlantic Rest of the World		of the World			
Please charge my credit c	ard:						
American Express □	Visa I	□ Diners	Club		Maste	rCard/Eurocard □	
Card Number _ _			_ _	Expiry Date M	IONTH	YEAR _	
Card holder's name (as show	vn on card)						
Credit card billing address (i							
Select your membership p	olan by marking	g (x) in one of t	he boxes	below:			
	Standard Membership		1	Standard Plus		Prestige Membership	
		•		Membership			
nnual Membership Fee		US\$79* US\$24		US\$224*		US\$359*	
ersonal lounge visit fee uest lounge visit fee	US\$24 US\$24		1	1 st 10 visits no charge US\$24		No charge US\$24	
andling Fee		\$\$10		US\$10		US\$10	
* Special discounted first year a US\$399)		·	fee usually	·	Plus usuall	·	
Please charge payment card in Lounge usage fees for my gues at the prevailing rate (currently joining, Priority Pass will pay thi	sts/my guest and I US\$24 per persor	dependent on me n, per visit). I unde	embership	plan as indicated a t tax is charged on t	bove) are he annual	also to be charged to this card membership fee and that upon	
Signature		Date					
is is a special offer and is not open to exist							

From time to time we give a few carefully selected organizations the chance to mail our members products and services which we believe may be of interest to them. Should you wish not to receive such offers please indicate by checking this box.

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