***Registration Fees Structure 2017***

**Please read all the information provided.**

|  |  |  |
| --- | --- | --- |
| ***Category*** | ***Trip Name*** | ***Fees Structure*** |
| **Adventure Outbound Travel/agent** | ***Nepal tour*** | **FOC** |
| **Outbound Tour Operator/Travel agent** | ***Nepal tour*** | **FOC** |
| **News agency/journalists** | ***Nepal tour*** | **FOC** |
| **Cooperate house** | ***Nepal tour*** | **ASK** |
| **Individual persons to attend the trip** | ***Nepal tour*** | **Ask** |
| **Home Base Travel agent** | ***Nepal tour*** | **Ask** |
| **Special FOC (On request)** | ***Nepal tour*** | [rajeshitani@sevenstartravelling.com](mailto:rajeshitani@sevenstartravelling.com) |

**Registration to confirm: Please fill the below form fully and then e-mail to** [reservation@sevenstartravelling.com](mailto:reservation@sevenstartravelling.com) **after we receive your registration, we will send a confirmation to you for your registration.**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| SL. No. | Full name of participant | | Sex | Nationality | Passport No. | Role in company | | Phone No. |
| 1. |  | |  |  |  |  | |  |
| 2. |  | |  |  |  |  | |  |
| 3. |  | |  |  |  |  | |  |
| 4. |  | |  |  |  |  | |  |
| Your Company’s Name: | | | | | | | | |
| Profile of your Company | |  | | | | | | |
| Trademark | |  | | | | | | |
| Taxpayer identification Number | |  | | | | | | |
| Legal address | |  | | | | | | |
| Business and post  address | |  | | | | | | |
| Bank Name and account number | |  | | | | | | |
| For Transfer your payment | |  | | | | | | |
| Email | |  | | | | | | |
| Web Site | |  | | | | | | |
| Tel Phone Number | |  | | | | | | |
| Mobile Number | |  | | | | | | |
| Fax Number | |  | | | | | | |
| Skype | |  | | | | | | |
| Former Responsibilities | |  | | | | | | |
| Current Responsibilities | |  | | | | | | |
| Nos. of Employee | |  | | | | | | |
| Company Transportation | |  | | | | | | |
| Current client supplying country | |  | | | | | | |
| Target client supplying to Nepal (Nos. of Pax/Nos. of room within a year) | |  | | | | | | |
| Contact You | | Tel: | | | | | Fax:N/A | |
| E-mail: | | | | | Email:  Skype: | |
| Mobile: | | | | |
| Business Address: | | | | |
| Contact us  (This part could be changed according to invitation company) | | Seven Star Adventure Holidays Pvt. Ltd  Nursing Chowk 26 Thamel  Kathmandu, Nepal | | | | |
| Tel: +977 01 4416385 | | | | | Fax +977 01 4267860 | |
| E-mail: [rajeshitani@sevenstartravelling.com](mailto:rajeshitani@sevenstartravelling.com) | | | | | Skype: Sevenstartravelling | |
| Contact Person: Mr. Rajesh Itani | | | | | Mobile: +977 9751038559 | |

Bank Account Details: