



Application Form 2025

Company Name	TEST
Address	TEST, TEST, TEST, ETS
Telephone Number	0094, 24352343
Mobile Number	0094, 234234234
Email Address	ameshdilshanmadusanka@gmail.com
Contact Person	Mr. TTEST
Position of Contact Person	TEST
Membership Type	Non-SLAITO
Company Scale	Non-MSME

We require 1 Units/Of 6 sqm. Shell Scheme

Preferd stall No(s) [Option 01]	B202
Preferd stall No(s) [Option 02]	B203
Total cost of LKR	RS. 59,000.00

Payment Details

All payments should be made by cheques drawn, in favour of "Sri Lanka Association of Inbound Tour Operators" and handed over to the Exhibition Secretariat, CDC Events, at the address mentioned below. If you wish to send a bank transfer please send to: "Sri Lanka Association Of Inbound Tour Operators" (A/C No. - 102002779908, Bank Name - DFCC Bank PLC, Code - 7454, Branch & Code - Fort Super Grade Branch, 111, SWIFT Code - DFCCCLKLX)



Seal



Signature

2025-01-30

Date

TEST

Name

TEST

Position

Organized by



Joint Event Organizer

CDC EVENTS

Authen Spence