Postal Address

Private Bag x424 Pretoria 0001

Physical Address

Tourism House 17 Trevenna Street Sunnyside, 0002

Contact Details

Call Centre: 0860 tourism Switch board: (+27) 12 444 6000 Web: www.tourism.gov.za

	MAF	RKET ACCESS	SUPPORT PROGRAMME APPLICATION FORM	
1	уре	of financial as	ssistance	
7	уре	e of event		
Ş	Spec	cify the event		
	A.	NOTES Please ensure that you have read and understood the guidelines for the	Check List	Attached (for applicant)
	D	assistance you are applying for.	1. Central Supplier Database (CSD) Registration Report	
	В.	Please ensure that you have read and answered all questions in the	2. Proof of Insurance Cover	
	C.	application form. Only completed applications will be	3. Proof of turnover	
		accepted and considered.	4. Proof of compliance with Amended Tourism B-BBEE Sector Codes	
	D.	It is important that you provide us with the correct and complete	5. Comprehensive company profile.	
		information to ensure that your application is	Additional documents required if applicable	
	E.	processed timeously. All applications should be signed by a duly authorised representative of the enterprise.	6. Industry Association: letter of confirmation from CEO/Chairperson	
	F.	All applications should be dated and submitted to	7. Joint Marketing Agreement: Letter of consent from	
		the Department of Tourism before or on the closing date.	Business	
	G.	Please ensure that you have attached all the	8. Commission Agents: Letter of consent from Business	
	Н.	required documents. Please note all information provided will be subjected to a		
		verification process and security vetting may be conducted where		
	l.	required. Please note that should you use any application form other than the one		
		provided by the Department of Tourism, your application will not be considered.		
	J.	For more information on the required supporting documents, please refer		





	1. DETAILS OF APPL	YING BUSINESS									
1.	1.1. Registered Name of the Business 1.2. Registered Trading Name of the Business 1.3. Business Registration Type										
1.3	1.3.1. If Other, specify:										
1.	1.4. Business Registration Number										
	1.5. Income Tax Number 1.6. Business Ownership Structure (please attach separate sheet should more space be required) Name of owner/director/etc. ID Number ID issued date Race (Black, Gender Living Youth of Percentage of										
	name or owner/director/etc.	ib Number	ib issued d	Colour White, Indian other)	ed,	(M/F)	with disability (Yes/No)	35 years and less	Shareholding (%)		
1.	7. Postal Address of Reg	istered Entity		1.8. Ph	1.8. Physical Address of Registered Entity						
Р	rovince			Provin	Province						
С	ode			Code							
1.9. Municipality: Metro					trict						
	Local										
1.	10. Contact Person										
1.10.1 Title 1.10.2 Po				Position							



1.10.3 Work Telephone



1.10.4 Cell Phone

.10.5 E-Mail Address
.10.6 Web Address
OPERATIONAL DETAILS OF THE APPLYING BUSINESS
.1. Tourism Sub-sector? (please select below)
Accommodation
Hospitality and related
Travel and related services
.2. B-BBEE Compliance Status of Enterprises
2.2.1 B-BBEE Compliance Level
.3. Brief description (not more than 100 words) of the enterprise's integrated nature of packages or services ffered?
2.4. Please indicate your business's turnover category for the past three years:
Current Turnover
urnover category year two (past)
Furnover category year three (previous)
.5. Is the business graded by the Tourism Grading Council of South Africa?
.6. Is the business registered for TOMSA?
(if yes, how many stars?)





2.7. Is the business a member of the TBCSA affiliated association/s? Afrikaanse Handelsintituut Airline Associations of South Africa Exhibition and Event Association of Southern Africa Federation Hospitality Association of Southern Africa Field Guide Association of Southern Africa South Africa Chef's Association South African Youth Travel Confederation Southern Africa Association for Conference Industry Southern Africa Tourism Services Association Southern Africa Vehicle Rental & Leasing Association Vacation Ownership Association of South Africa					
Airline Associations of South Africa Exhibition and Event Association of Southern Africa Federation Hospitality Association of Southern Africa Field Guide Association of Southern Africa South Africa Chef's Association South African Youth Travel Confederation Southern Africa Association for Conference Industry Southern Africa Tourism Services Association Southern Africa Vehicle Rental & Leasing Association Vacation Ownership Association of South Africa					
Exhibition and Event Association of Southern Africa Federation Hospitality Association of Southern Africa Field Guide Association of Southern Africa South Africa Chef's Association South African Youth Travel Confederation Southern Africa Association for Conference Industry Southern Africa Tourism Services Association Southern Africa Vehicle Rental & Leasing Association Vacation Ownership Association of South Africa					
Federation Hospitality Association of Southern Africa Field Guide Association of Southern Africa South Africa Chef's Association South African Youth Travel Confederation Southern Africa Association for Conference Industry Southern Africa Tourism Services Association Southern Africa Vehicle Rental & Leasing Association Vacation Ownership Association of South Africa					
Field Guide Association of Southern Africa South Africa Chef's Association South African Youth Travel Confederation Southern Africa Association for Conference Industry Southern Africa Tourism Services Association Southern Africa Vehicle Rental & Leasing Association Vacation Ownership Association of South Africa					
South Africa Chef's Association South African Youth Travel Confederation Southern Africa Association for Conference Industry Southern Africa Tourism Services Association Southern Africa Vehicle Rental & Leasing Association Vacation Ownership Association of South Africa					
South African Youth Travel Confederation Southern Africa Association for Conference Industry Southern Africa Tourism Services Association Southern Africa Vehicle Rental & Leasing Association Vacation Ownership Association of South Africa					
Southern Africa Association for Conference Industry Southern Africa Tourism Services Association Southern Africa Vehicle Rental & Leasing Association Vacation Ownership Association of South Africa					
Southern Africa Tourism Services Association Southern Africa Vehicle Rental & Leasing Association Vacation Ownership Association of South Africa					
Southern Africa Vehicle Rental & Leasing Association Vacation Ownership Association of South Africa					
Vacation Ownership Association of South Africa					
· ·					
Other,					
other,	•				
Please specify:					
2.9. Please indicate your business percentage split between domestic and international clients/to	ourists:				
	ourists:				
2.9.1. International % 2.9.2. Domestic %	ourists:				
2.9.1. International % 2.9.2. Domestic %	ourists:				
2.9.1. International % 2.9.2. Domestic % 2.10. Please indicate the target market of your business:	ourists:				
2.9.1. International % 2.9.2. Domestic % 2.10. Please indicate the target market of your business: Africa	ourists:				
2.9.1. International % 2.9.2. Domestic % 2.10. Please indicate the target market of your business: Africa America & Caribbean	ourists:				





2.11. Total number of employees?

	Permanent		Temporary		
Race	Male	Female	Male	Female	
Black					
White					
Coloured					
Asian/Indian					
Total					

2.12. Total number of employees living with disability?

3. DETAILS OF PROPOSED TRAVELLERS

- 3.1. Name of proposed traveller
- 3.2. Title

3.3. Position

3.4. Work Telephone

3.5. Cell Phone Number

- 3.6. E-Mail Address
- 3.7. Identity Number
- 3.7.1 Passport Number
- 3.8. DETAILS OF THE NEXT OF KIN
- 3.8.1. Name & Surname
- 3.8.2. Telephone

3.8.3. Cell phone number

3.8.4. Email address





4. THE PROTECTION OF PERSONAL INFORMATION ACT 4 OF 2013(POPIA):

The Department respect your privacy and acknowledge that your documents will contain personal information which may belong to you or others. By submitting your documents, you give the Department consent to process information in accordance with POPIA. Furthermore you grant the Department express and/or implied permission to further process received personal information and place it in the public domain, in the execution of its mandate and statutory obligations. The Department disclose personal information if required by the law enforcement angencies and other parties who provide the Department with the relevant/required services. The Department will authorise access to personal information only to employees who require the information to execute their work-related responsibilities. The Department will archive your personal information in line with the applicable laws.

The Department values your privacy and shall take all reasonable measures to protect received personal information.

The Department (including its officials and/or employees) accepts no liabilibity whatsoever, for any loss,damage (whether direct, indirect, special or consequential) and /or expenses of any nature whatsoever which may arise as a result of, or which may be attributable directly or indirectly, from information made available herein, or actions or transactions resulting therefrom.

I have read, understood and accept the Programme (Guidelines terms and condition	ons (plea	ase tick)		
		in	my cap	acity	as
	,	hereb	y declare	that	the
information in this application is a fair and true reflec	tion (incl. relevant attachme	nts) of t	he applyin	g busin	iess.
I am aware of the fact that the information submitted	above (incl. attachments) w	ill have	a materia	bearin	g on
the adjudication of the application. Therefore, should	l it appear that any informati	on in th	e applicat	ion was	s not
correct or omitted, the adjudication committee shall I	pe entitled to withdraw or an	nend its	decision	and wit	hout
prejudice to its rights, to recover any amounts alread	ly paid including interest or	to withh	old furthe	r paym	ents
due. Should my application be successful, I further	undertake to furnish follow-	up repo	rts on the	succes	sses
achieved by the trip not later than two (2) months af	ter my return and upon the re	equest l	by the dep	artmen	ıt six
months thereafter.					
Signature ·····	Date ·····				

Please initial each page and sign. Completed forms are to be emailed to: tipapplications@tourism.gov.za,



the Department of Tourism.

5. DECLARATION

