



CTO (MIDDLE EAST) INCENTIVE SCHEME FORM
(TO BE FILLED BY THE TRAVEL AGENCY)

NAME OF TRAVEL AGENCY: _____

NAME OF INCOMING DMC IN CYPRUS: _____

NAME OF TRAVEL AGENT: _____

COUNTRY(S) OF ORIGIN: _____

DATES OF ARRIVAL AND DEPARTURE WITH FLIGHT NUMBERS:

SIZE OF GROUP (PAX): _____

NAME OF COMPANY OR ASSOCIATION/ORGANISATION:

CONTACT PERSON OF COMPANY OR ASSOCIATION/ORGANISATION:

NAME OF HOTEL(S) USED IN CYPRUS:

EXTRA COMMENTS (e.g. GROUP IS VEGETARIAN):

Date of submission:

Marketing officer:

Officer in Charge: Approved / Disapproved