



Errors & Omissions Waiver

Affirmation of Reliability of the Entity's Actions

I, _____
(Printed Name)

Owner/Legal Representative of _____
(Entity Name)

located at _____
(Business Physical Address)

IATA Numeric Code (if applicable): _____

1. I have reached the age of majority.
2. I am the Owner or Legal Representative of the business entity **(If not, please complete the E&O Waiver for Employees)**.
3. I have at least (2) years full-time experience within the last ten (10) years as a travel professional or meeting / event planner professional and have provided required proof of experience to IATAN, **or** I have earned certification in at least one of the following and have provided a copy of my certification to IATAN:
 - [IATA/ARC Training Certificate](#)
 - [ARC Specialist Certification](#)
 - CTA (Certified Travel Associate)
 - CTC (Certified Travel Counsellor)
 - CMP (Certified Meeting Professional)
 - CMM (Certification in Meeting Management)
 - CSEP (Certified Special Event Professional)
 - CLIA Certificate
 - MPI Certificate (Meeting Planners Institute)
 - Travel/Hospitality School Diploma or Degree
 - [Travel Advisor Resource Center Certification](#)
4. I am dedicated to the promotion of commercial ethics and maintain a professional business environment within the travel, meeting and / or event planning community.

I have read the foregoing Affidavit, and to the best of my knowledge it is true and correct.

Signature of Owner / Legal Representative

Printed Name

Date

Notary Public

State of _____, in the country of _____ on _____ day, of the _____ month, in the year of _____, before me appeared (name) _____ and stated that he/she is the (title) _____ of (name of organization) _____ and that the information provided on this form is true and correct. My commission expires on (date): _____ Notary Public: _____