

CIP SERVICE APPLICATION FORM

Applicant's Details

Name of Applicant:

Contact Person: Telephone/Mobile: Fax: Email:

Billing Address:

Contact Person: Telephone/Mobile: Fax: Email:

Flight Details

Arrival Departure Origin/Destination:

Airline: Flight No: Time: Date:

Travellers Information

Name:	PP Number:	Country:	Remarks:
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

Accompanying Person's Information (Non-Travelling)

Name:	PP/ID Number:	Designation:	Hotel/Resort/Company:
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

** If additional space is required, please attach a separate sheets in this format.*

Travelling Class - Arrival only
 (Please tick (✓) below)

First Class Business Class Economy

Seat Preference - Departure only
 (Please tick (✓) below)

Window Isle

Special Assistance (Please tick (✓) required service below)

Wheel Chair Stretcher Ambulance

If any special name preferred for "Name Board" please write below in block letters

Optional Services (Please tick (✓) required service below)

Limousine Service to/from Apron(\$14) Limousine Service to/from Seaplane Terminal(\$16)

Limousine Service to/from Apron to Seaplane Terminal(\$28)

** Subject to availability*

Important Information

- Maamahi Lounge Reservation will be open from **08:00hrs to 22:00hrs**.
- A separate form must be submitted for each flight.
- Reservation of CIP should be made **06 hours** prior to the scheduled arrival/departure time of the flight.
- Payment should be settled at least **04 hours** prior to flight arrival/departure time.
- Applications submitted during non-working hours will be accepted from lounge opening time. (In case of early morning flights, the payment must be settled prior to the passenger movement).
- Prices For Booking:

Category	Cost Per Person
Passenger	\$ 219.07
Infants (2 years and below)	N/A
Accompanying Person (Non-Travelling)	\$ 61.14
Walk-in Customers	\$ 75.6

**Accompanying person are non-travelling guests who wish to stay in the lounge with Arrival/ Departure guests.*

- Passengers departing on scheduled flights are requested to arrive at Maamahi Executive Lounge **01 hour 30 minutes** ahead of Departure time.
- Maamahi Executive Lounge will not be liable regarding any delays caused by the airline or interruption of service due to late arrival of the departing passenger. (Maamahi Executive Lounge reserves the right to decline CIP service in such circumstances).

For reservations, please submit the completed application form by E-mail cip@macl.aero.

I have read and agreed to abide by the terms and conditions for CIP service.

Name :

Designation:	Date:	Time:	Signature/ Stamp
<input style="width: 100%; border: none; border-bottom: 1px solid #ccc;" type="text"/>	<input style="width: 100%; border: none; border-bottom: 1px solid #ccc;" type="text"/>	<input style="width: 100%; border: none; border-bottom: 1px solid #ccc;" type="text"/>	<div style="border: 1px solid #ccc; height: 80px; width: 100%;"></div>

Authorised Signatory of MACL (Maamahi Executive Lounge)

Name :

Designation:	Date:	Time:	Signature/ Stamp
<input style="width: 100%; border: none; border-bottom: 1px solid #ccc;" type="text"/>	<input style="width: 100%; border: none; border-bottom: 1px solid #ccc;" type="text"/>	<input style="width: 100%; border: none; border-bottom: 1px solid #ccc;" type="text"/>	<div style="border: 1px solid #ccc; height: 80px; width: 100%;"></div>

NOTE: Forms without the applicants signature or stamp will not be accepted