REGISTRATION FORM

New Customer Registration

Software House : GoFreight

Business Information

Company/Forwarder Name:

Headquarters’ Address / Postcode of City:       /

Country:

Website:

**Business Classification:**

Forwarder

1. **How many branch offices** will be sending messages to airlines?
2. **Please specify the number of shipments** (Air Waybills) you have per year:
3. Please list your **top airlines** and the percentage of shipments with each one (if possible):  
   airline:      /percentage:      ; airline:      /percentage:      ; airline:      /percentage:      ;  
   airline:      /percentage:      ; airline:      /percentage:      ; airline:      /percentage:      ;
4. Do you have any other requirements? (Re-routings, discarding, duplication, mapping etc.):   
   If yes, please mention which one:
5. Are you connected to any other Cargo Community System (CCS)?   
   Current provider:
6. Can you support all messages of **all your offices worldwide via a single account**?
7. When would you like to get connected to CHAMP?

Exhibit 1: Freight Agent Branches

1 IATA/CASS are mandatory for proper registration of your offices with Airlines

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **IATA**  **Country**  **Code** | **Company Name**  **Address**  **Postcode City, Country** | **Shipment volume / month** | **IATA/CASS**1 **code** | **Action**  **(add, modify, delete)** | **Connectivity** |
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Exhibit 2: e-Communication Services Selection Form

Contacts Information

###### Main Contact

###### Title: Mr. Ms.

First Name / Last Name:       /

Function:

Department:

Address / Postcode City:       /       (if not the HQ’ address)

(and/or)

P.O. BOX / Postcode City:       /       (only if necessary and available)

Country:

Phone/Fax:       /

Email:

###### Technical Contact

Company: GoFreight (if an external company like a software house)

###### Title: Mr. Ms.

First Name / Last Name:       /

Function:

Department:

Address / Postcode City:       /

Country:

Phone / Fax:       /

E-Mail: