

DX HOLIDAY[®] APPLICATION FORM

PLEASE FILL IN THE FOLLOWING INFORMATIONS

To subscribe to DX HOLIDAY www.dx-holiday.com you must fill out the form, sign and date for acceptance. Send to info@dx-holiday.com

Fields marked with an asterisk (*) are required.

Country*

Name of the hotel / guest house*

Address*

City* ZIP*

Web site*

Email*

Owner name*

Email*

Profession*

Telephone number / Skype*

HAM RADIO: YES / NO CALL SIGN

ABOUT AMATEUR RADIO IN YOUR COUNTRY

Can you obtain a amateur radio licence for your guest? YES / NO

Any application form available? YES / NO

Waiting time for the licence?

How much it will cost? EUROS or USD

Reciprocal licence with C.E.P.T. or USA?

Is possible to rent radio equipment and/or antennas? YES / NO

ABOUT VISA FOR YOUR COUNTRY

Where the guests can obtain a tourist VISA? AIRPORT or EMBASSY

How much it will cost? EUROS or USD

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PLEASE GIVE US FOLLOWING INFORMATIONS ABOUT YOUR COUNTRY

- How to get there
- Info about visa
- Health
- Currency
- Language
- Electricity
- Time
- Weather
- Sports, activities and excursions

If you are on a island, please give us also informations about you location

- Introduction
- Geography
- Climate
- Economy
- Transportation
- Note

Please send us 10 high resolution pictures about your location

ABOUT YOUR HOTEL OR GUEST HOUSE

Please send us a description of your hotel or guest house

- Introduction
- Number and rooms style
- Room Facilities
- Price for week
- Extra services
- SPA
- Diving, sports, activities and excursions

Any suggestions are welcome

Please send us 10 high resolution pictures about your location

ABOUT DX HOLIDAY SUBSCRIPTION

DX HOLIDAY will put on a web page dedicated to your business with complete informations about a DX holiday with you.

You can advertise your business for 1 or 3 years. Take a look to the subscription prices below.

DX Holiday offers you:

1 year subscription for only 50€ or 3 years subscription for only 100€

You want to subscribe years for €

DX Holiday will send you an email with details for your payment on PayPal

DATE _____ **SIGNATURE** _____