



Application Form  
Les Clefs d' Or Thailand

Write at: \_\_\_\_\_

Name: \_\_\_\_\_

ชื่อ (ภาษาไทย) นาย/นาง/นางสาว \_\_\_\_\_

Passport / ID Number: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Nationality: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Mobile Number: \_\_\_\_\_ Home Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Hotel Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone Number: \_\_\_\_\_ Ext. Number \_\_\_\_\_

Fax Number \_\_\_\_\_ Email: \_\_\_\_\_

Work Experiences in hotel business:

Hotel Name: \_\_\_\_\_ Number of Year(s): \_\_\_\_\_

Position: \_\_\_\_\_ Tel. Number: \_\_\_\_\_

Hotel Name: \_\_\_\_\_ Number of Year(s): \_\_\_\_\_

Position: \_\_\_\_\_ Tel. Number: \_\_\_\_\_

The following questions are to be answered satisfactorily:

1. What does "Les Clefs d' Or" mean to you?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Why you wish to join the Les Clefs d' Or Thailand?

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\_\_\_\_\_  
\_\_\_\_\_

3. What do you expect from this association?

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4. What “Les Clefs d’ Or Thailand” will benefit from your association?

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5. Will you strictly act and follow the constitution of Les Clefs d’ Or Thailand?

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6. Will you fully support and promote the association members?

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7. Will you do your best to support Les Clefs d’ Or members for both national and international?

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8. Will you participate in activities organized by Les Clefs d’ Or Thailand?

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9. Will you do your best to promote Les Clefs d’ Or Thailand and behave yourself as a good role model?

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10. If in doubt at any time, will you consult the Executive Committee Members before taking any action likely to bring the association disfavor of the industry?

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I wish to join the Les Clefs d’ Or Thailand, I have enclosed my resume and letter of recommendation from the General Manager for your kind approval.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Application proposed by (International Full Member):

Name: \_\_\_\_\_ Hotel: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_ Hotel: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_