

ASA BROCHURE RACK RATE CHART



2018 RATE ON SLOT SUBSCRIPTION & REPLENISHMENT FEE

Distribution Type & Benefits	Ordinary Member	Associate Member	Non-Members (Limited to 5 slots only in each rack)
Comprehensive Package [Distribution in all Routes - 1 Slot in Premium, Economy, DM and Concierge Routes. Inclusive of Annual Brochure Slot Subscription and Replenishment Fees]	\$11,000 per year	\$18,000 per year	Not Applicable
Premium Route Fees for 1 st Slot Slot Subscription Fee Per Slot Replenishment Fee Per Slot <i>Fees for 2nd Slot</i> <i>Slot Subscription Fee Per Slot</i> <i>Replenishment Fee Per Slot</i> <i>Fees for 3rd Slot and more</i> <i>Slot Subscription Fee Per Slot</i> <i>Replenishment Fee Per Slot</i>	\$3,000 per year \$1,800 per year <i>\$2,250 per year</i> <i>\$1,800 per year</i> <i>\$1,500 per year</i> <i>\$1,800 per year</i>	\$8,000 per year \$1,800 per year <i>\$6,000 per year</i> <i>\$1,800 per year</i> <i>\$4,000 per year</i> <i>\$1,800 per year</i>	\$15,700 per year \$ 1,800 per year <i>Not Applicable</i> <i>Not Applicable</i>
Economy Route Fees for 1 st Slot Slot Subscription Fee Per Slot Replenishment Fee Per Slot <i>Fees for 2nd Slot</i> <i>Slot Subscription Fee Per Slot</i> <i>Replenishment Fee Per Slot</i> <i>Fees for 3rd Slot and more</i> <i>Slot Subscription Fee Per Slot</i> <i>Replenishment Fee Per Slot</i>	\$3,000 per year \$1,800 per year <i>\$2,250 per year</i> <i>\$1,800 per year</i> <i>\$1,500 per year</i> <i>\$1,800 per year</i>	\$8,000 per year \$1,800 per year <i>\$6,000 per year</i> <i>\$1,800 per year</i> <i>\$4,000 per year</i> <i>\$1,800 per year</i>	\$15,700 per year \$ 1,800 per year <i>Not Applicable</i> <i>Not Applicable</i>
DM Route Slot Subscription Fee Per Slot Replenishment Fee Per Slot	FOC with Economy \$1,200 per year	FOC with Economy \$1,200 per year	Not Applicable
Concierge Route Slot Subscription Fee Per Slot Replenishment Fee Per Slot	Not Applicable \$1,200 per year	Not Applicable \$1,200 per year	Not Applicable

Replenishment Fee (Per Slot Per Month)

Premium Route	\$150
Economy Route	\$150
DM Route	\$100
Concierge Route	\$100

Please contact ASA for enquiries & more information
 Tel : 6377 6615 / 6278 2538
 Email : secretariat@singapore-attractions.com

ASSOCIATION OF SINGAPORE ATTRACTIONS

Brochure Rack Slot Subscription & Replenishment Application Form & Agreement [Page 1 of 2]

ASA Member	<input type="checkbox"/> Ordinary Member <input type="checkbox"/> Associate Member <input type="checkbox"/> Non Member
Name of Company	
Address	
Contact Person	
Designation	
Email Address	
Telephone Numbers	

We wish to apply for the following brochure rack subscription package :-

S/N	Descriptions	No. of Slots	Subscription Slot Fee (\$)/yr	Replenishment Fee (\$) / yr	Duration (Month)
1	Premium Route				
2	Economy Route				
3	DM Route				
4	Concierge Route				
5	Comprehensive Package				

Remarks / Any Special Requirements

ASSOCIATION OF SINGAPORE ATTRACTIONS

Brochure Rack Slot Subscription & Replenishment Application Form & Agreement [Page 2 of 2]

Payment Schedule

Subscription of brochure racks slots must be paid at least 14 days prior to the required date of commencement. Brochures will only be replenished upon receipt of the applicable fees. All fees paid are non-refundable. Unless otherwise agreed, all invoices will be issued by ASA and payment shall be made by subscribers on a monthly basis.

Subscription Period

Subscription of brochure racks slots are as stated in this agreement are for the period indicated. Negotiation of new terms and conditions for subscription of brochure racks must be done at least 30 days before the expiry of the current agreement.

FOR SUBSCRIBER'S CONFIRMATION

We _____ agree to the stipulated terms and conditions of the Association of Singapore Attractions pertaining to this subscription and shall pay the applicable fees accordingly. We understand that our application is subject to slot availability and approval and shall provide a copy of our brochure for evaluation.

We would like to commence our subscription with effect from _____ and for a period of _____ month(s) / year(s)*.

**Please delete where inappropriate.*

Name of Signatory

Signature

Company Stamp

Date

FOR OFFICIAL

The above application is approved / rejected. For approved subscription, the follow applies:

Commencement Date	
Routes & Number of Slots Assigned	
Fees Payable :	

Application Approved by Executive Committee : _____ (Date of Meeting)

Secretariat Member In-Charge : _____