

REGISTRATION FORM

This form must be completed by the organization wishing to access Bahrain International Airport, its landside or airside for approved business activities. This form should be carefully read, filled up and printed. It must be signed by the applying organization sponsor(s), Managing Director or a person legally authorized as per the Commercial Registration. The signed and stamped document along with other relevant and required documents should be sent to Bahrain Civil Aviation Pass Office, located at Bahrain International Airport. All documents must be authentic and clear, readable copies must be attached.

Please send a soft copy of this form filled and signed to airport.pass@mtt.gov.bh

- *New Organization (Directly engaged with CAA)
- *Existing Organization (in business with CAA or BAC)
- *Contractor to an existing Registered Organization (in business with CAA or BAC)

INFORMATION ABOUT THE ORGANIZATION

*Organization Name (in English) _____

Organization Name (in Arabic) _____

*Country where this business is registered _____

Operational Office Country _____

City _____

*Address _____

Postal or Zip Code _____

*Phone Number _____

*Fax Number _____

E-Mail of the Organization [General Contact Email] _____

Web site _____

* Categories [Line of Business(s)] _____

[Areas of Operation]. _____

ORGANIZATION REGISTRATION DETAILS

*Commercial Registration/License Number _____

*Expiry Date of Commercial registration/License Number _____

Organization Type [Local or Foreign] _____

*Country of Establishment _____

*Year of Establishment _____

Parent Company Name [if any] _____

Parent Company Number [Contact Details] _____

ORGANIZATION'S CONTACT PERSON INFORMATION

***Contact Person Name [Management or Head of Organization]**

Full Name _____

Title _____ Nationality _____

CPR Number _____ Validity/Expiry _____

Phone Number _____ Fax Number _____

Mobile Number _____ E-Mail _____

Signatures _____ Official Stamp _____

Date _____

Important Note: If you are a contracting company, working for multiple organizations, please state below the names of these organizations (Example: Your company has contracts with CAA as well as BAC etc. You may attach your contract copies with each organization)

***1ST CONTACT PERSON NAME [AUTHORIZED PERSON WHO WILL BE APPLYING FOR THE PASSES]**

Full Name _____	
Title _____	Nationality _____
CPR Number _____	Expiry _____
Date and Place of Birth _____	
Passport Number _____	Passport Expiry _____
Phone Number _____	Fax Number _____
Mobile Number _____	E-Mail _____
AVSEC Training Date _____	Organization _____
Signatures _____	Official Stamp _____

***2ND CONTACT PERSON NAME [AUTHORIZED PERSON WHO WILL BE APPLYING FOR THE PASSES]**

Full Name _____	
Title _____	Nationality _____
CPR Number _____	Expiry _____
Date and Place of Birth _____	
Passport Number _____	Passport Expiry _____
Phone Number _____	Fax Number _____
Mobile Number _____	E-Mail _____
AVSEC Training Date _____	Organization _____
Signatures _____	Official Stamp _____

Note: You may like to add another page if you are applying for more than 2 authorized persons. Please consult CAA for maximum number of authorized persons who can apply for passes on your behalf.

PERSONAL EMAIL ADDRESSES ARE NOT ALLOWED AND ENTIRE APPLICATION WILL BE REJECTED



KINGDOM OF BAHRAIN

Ministry of Transportation
and Telecommunications

FINANCIAL INFORMATION

* Beneficiary Name _____

* Bank Name _____

* Branch name _____

* Bank Account No. _____

* Swift code _____

* IBAN _____

Sort Code _____

BIC _____

* Payment Methods Transfer Cheque On-Line via BIA Site

* Currency _____

AUTHORIZED SIGNATURES DATE AND STAMP

DECLARATION AND ACKNOWLEDGEMENTS

I, the undersigned, fully understand my responsibility as an Authorized Signatory on the Bahrain International Airport Pass System. In particular, I understand rules regarding the referencing, security clearance requirements and the administration process associated with the issuance of Airport Identification Passes, Airside Vehicle Permits, and Special Security Authorization Cards, as well as the respective Employer Obligations stated in the BIA Pass Office Manual. I have been made aware of, and understand my obligations as an Authorized Signatory, and certify that to the best of my knowledge and belief, the persons for whom I will authorize the issue of Airport Passes, will be of suitable character and integrity to be employed in the security restricted areas of Bahrain International Airport.

I am aware that it is an offence, under the Bahrain Civil Aviation Regulations, to give false information, either for the purpose of, or in connection with an application for an Airport Identification pass. I further confirm that I will only authorize the issue of requests for persons and vehicles whose access to the Airport's controlled areas are required for their employment or related to the requesting organization's operational needs.

As the Accountable Manager of the requesting organization, and with legal powers for such purpose, I appoint the above identified Signatories as Authorized to request, approve and/or authorize all documentation related to requests for Airport Identification Passes, Airside Vehicle Permits, Airside Driving Permits and Special Security Authorization Cards for persons and vehicles whose access to the Airport's controlled areas are required for their employment or related to the requesting organization's operational needs.

I understand that the Authorized Signatory role plays a major part in Airport Security and Safety, and confirm that the nominated Authorized Signatories are responsible individuals who shall be effective in following National and Airport Security and Safety Regulations.

I understand that Bahrain International Airport – BIA - has the right to refuse the issue of any request where the submitted documentation, applicants or vehicles do not meet the required criteria, and that BIA shall not be held accountable for any delays in the clearance process, cancellation or denial of the submitted request. I also understand and accept that Bahrain International Airport has the right to cancel at any moment, without prior notice, an Authorized Signatory from the Bahrain International Airport Pass System.

Name of the Authorized Person _____

Position/Designation _____

Signature, date and stamp _____

DOCUMENTS REQUIRED TO REGISTER NEW ORGANIZATION OR TO UPDATE INFORMATION

1	Original Application form of company signed by authorized signatory and containing company stamp.	<input type="checkbox"/>
2	Copy of Commercial Registration	<input type="checkbox"/>
3	Approved List of authorized signatories, issued by relevant authority (Foreign Organizations)	<input type="checkbox"/>
4	Letter issued by the Bank to clarify the details of Official Bank Account No., and address, IBAN No. and Branch Name ...etc.	<input type="checkbox"/>
5	List of authorized subcontractors and distributors	<input type="checkbox"/>
6	Copy national ID/CPR, Passport of owner(s) of the company, which is to be registered.	<input type="checkbox"/>
7	Copy national ID/CPR, Passport of Authorized Person(s), which is to be registered.	<input type="checkbox"/>
8	List of previous and current client references	<input type="checkbox"/>
9	Signed Non-Disclosure Agreement (NDA)	<input type="checkbox"/>