

**APPLICATION TO OPERATE A TOURISM ENTERPRISE**  
**TO THE BOARD OF DIRECTORS OF THE GRENADA TOURISM AUTHORITY, I HEREBY APPLY FOR A**  
**LICENCE TO OPERATE A TOURISM ENTERPRISE UNDER SECTION 28 OF THE GRENADA TOURISM**  
**AUTHORITY**  
**ACT NO. 42 OF 2013**  
**TOURIST GUIDE**

Name:

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Address:-

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Telephone:- \_\_\_\_\_

Email:-

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Age:- \_\_\_\_\_

Gender: (M) \_\_\_\_\_

(F) \_\_\_\_\_

**EMPLOYER INFORMATION**

Employed By/Contracted By: - \_\_\_\_\_

Address:-

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Telephone #:- \_\_\_\_\_

Mobile#:-

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

Types of Tour (please specify):-

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I hereby certify that the above information is correct in all respect. I understand that failure to provide true and correct information could result in rejection of this application.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

**DOCUMENTS TO BE SUBMITTED WITH COMPLETED APPLICATION FORM**

1. Valid Police Record from Royal Grenada Police Force
2. Character Reference from qualified persons (non-relative) e.g., School Principal, Priest, Doctor
3. Tour Guide Certificate
4. Letter, Contract or Agreement (where applicable)
5. Health Certificate from Health Clinic or Medical Doctor
6. Public Liability Insurance, if not employed by a Tour Operator
7. Ministry of Health COVID-19 Certificate of Inspection
8. Ministry of Health COVID-19 Certificate of Training
9. Copy of NIS Registration Card
10. Work Permit (where applicable)

**FOR OFFICIAL USE ONLY**

Name of Tourism Enterprise:

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Receipt Details:

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Amount Paid: \_\_\_\_\_

Payment Date:

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Paid To: \_\_\_\_\_

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Inspection Date: \_\_\_\_\_

Date Licensed:

\_\_\_\_\_

Expiry Date: \_\_\_\_\_

Signature:

\_\_\_\_\_