

TTARP...an Association of Responsible Persons

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DISCOUNT PROVIDER AGREEMENT

OFFICIAL USE ONLY
Date Rec'd
Responded
Entered
Co ID

Name of Business				
ategory of Business				
Address of Business				
Business Telephone Contact(s)		Business	Business Email	
	Website	Company	Facebook	
Address & Contact Numbers of Other Branches (if any)				
Contact Person		Position		
Telephone #		Email		
Discount (your offer must be specific)	following discount(s):	ective immediately we will	be offering to TTARP Members the	
We agree to be valid member location of but	rship cards. It is also our	ed above, and will give s understanding that any etc must be made in wr	ame to TTARP Members with changes, such as discounts, iting to TTARP to be updated.	
Name:				
Signature:				
Date:				
Approved by:		(TTARP Official)	TTARP Stamp	