



Documents for consideration regarding the application of Thai Spa Association membership

For spa operator, please fill in the following information:

| | |
|--|-------|
| Name of spa | _____ |
| Number of service room | _____ |
| Number of massage bed | _____ |
| Number of facial massage bed | _____ |
| Number of foot massage chair | _____ |
| Number of employee | _____ |
| Opening & closing times | _____ |
| Capital investment | _____ |
| Year of establishment | _____ |
| Has conducting license for health hazardous business | _____ |
| Has the certificate of health spa industry standard | _____ |
| If yes, type of business (spa, massage, beauty) | _____ |
| Has the certificate of health spa operator | _____ |

Remarks :

The above information will be kept in membership database for the objectives of other media promotions. Therefore please kindly fill in the form completely.

Enclosed documents

- Copy of company affidavit shall be valid for 6 months or commercial registration certificate
- Brochure or picture of spa
- Spa menu
- Copy of certificate of health spa industry standard (latest version, if on hand)
- Copy of conducting license for health hazardous business (latest version)
- Copy of certificate of health spa operator (latest version, if on hand)
- Acknowledgement signing of Thai Spa Association ethics documents



For spa product manufacturer/supplier

Enclosed documents

- Copy of company affidavit (valid for 6 months)
- Acknowledgement signing of Thai Spa Association ethics documents