



APPLICATION FOR MEMBERSHIP

- Renewal (updates, additions & revisions)
- Property (hotels, resorts, B&Bs, motels & lodging properties)
- Allied (suppliers, vendors, DMOs, Chambers & related services)

 Name of Property, Company or Organization DBA, if applicable

 Business Address City/State/Zip

(_____) _____
 Telephone Website

Key Contacts: **Name, Title & Email Address of Representative(s):**

Management Contact
 (CEO, General Manager) _____

Food & Beverage _____

Human Resources _____

Sales & Marketing _____

Security
 (Loss Prevention, Safety, Security) _____

Ownership/Company
 (Corporate, Franchise, Proprietor) _____

Property Members: Number of Rooms - _____ Meeting Space - _____ square feet

Annual Dues Schedule: Property - \$14.00 per room (\$1,000.00 minimum)
 Allied - \$500.00 per year

Dues schedule is set and approved by the Board of Directors. Dues payments are not deductible as charitable contributions for federal income tax purposes. However, they may be deductible by members as an ordinary business expense. Please consult your accountant or tax professional for further information.

PAYMENT INFORMATION

Payment Method: Check Enclosed (Make check payable to: Hotel Association of Los Angeles)

Credit Card: American Express MasterCard VISA

Account #: _____ **Expiration:** _____ **CVV:** _____

Cardholder: _____ **Signature:** _____

Submit this application to:

Hotel Association of Los Angeles
 355 S. Grand Avenue, Suite 2450 | Los Angeles, CA 90071-9500
 Phone: (213) 474-1223 | Fax: (916) 444-5848
 Email: Veronica@hotelassociationla.com