



## APPLICATION FOR MEMBERSHIP

I WISH TO BECOME A MEMBER AND SUBMIT HERewith THE FOLLOWING INFORMATION REQUIRED.

NAME OF COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_ POSITION: \_\_\_\_\_

TELEPHONE #: \_\_\_\_\_ FACSIMILE #: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ WEBSITE: \_\_\_\_\_

TYPE OF BUSINESS: \_\_\_\_\_

\_\_\_\_\_ HOW LONG ESTABLISHED: \_\_\_\_\_

TYPE OF MEMBERSHIP (CHECK ONE): ORDINARY: \_\_\_ AIRLINE: \_\_\_ ASSOCIATE: \_\_\_

RESTAURANT \_\_\_\_\_

IF ORDINARY (APARTMENT, CONDOMINIUM, HOTEL), TOTAL NUMBER OF ROOMS: \_\_\_\_\_

APPLICATION DATE: \_\_\_/\_\_\_/\_\_\_ APPLICANT'S SIGNATURE \_\_\_\_\_

### TWO REFERENCES:

CONTACT NAME: \_\_\_\_\_ CONTACT NAME: \_\_\_\_\_

COMPANY: \_\_\_\_\_ COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

PHONE #: \_\_\_\_\_ PHONE #: \_\_\_\_\_

### PLEASE DO NOT COMPLETE THIS SECTION. FOR OFFICE USE ONLY:

DATE RECEIVED: \_\_\_\_\_ DATE REVIEWED: \_\_\_\_\_

RECOMMENDATION: \_\_\_\_\_

DATE SUBMITTED TO BOARD: \_\_\_\_\_ DECISION: \_\_\_\_\_

BOARD'S DECISION: \_\_\_\_\_