

Lodging Membership Application

PROPERTY INFORMATION

Property Name:					
Property Address:					
City:		Zip Code:		County:	
Phone:	Toll F	ree:		Fax:	
Website:		Social Media	a:		
Number of Rooms:	Type of Roo	oms: 🗆 Rooms 🛭	□ Suites □ Cabins □ 0	Condos 🗆 O	ther:
Number of Meeting Rooms: _	Neeting Rooms: Numbe		Number of Resta		aurants:
PRIMARY CONTACT					
Name:	Tit	le:		E-Mail:	
KEY PERSONNEL (Please of	omplete all positions th	at are different tha	an primary contact)		
General Manager:	□ Mr. □ Ms			_ E-Mail:	
Director of Sales/Marketing:					
Human Resource Director:					
Controller:					
Director of Housekeeping:	□ Mr. □ Ms			_ E-Mail:	
Front Office Manager:	□ Mr. □ Ms			_ E-Mail:	
Please add additional position MAILING/BILLING INFORMA Company:	ATION (If different than	Property Informat	tion)		
Contact Name:					
Company Address:					
City:				e Number:	
		MEMBERSHIP IN	NVESTMENT		
	16 36 51- 15 Constru	15 Rooms -35 Rooms -50 Rooms 150 Rooms 1+ Rooms uction Member	AzLTA \$100.00* \$250.00* \$325.00* \$10.75 per room \$11.25 per room \$300.00 pperties 1-50 rooms (Optional)		
Signature:	Title:				Date:

We hereby submit our application for membership in the Arizona Lodging & Tourism Association

^{*}In keeping with our AZSAFE+Clean self-certification program, we will be sending the marketing items by email.

^{*}In keeping with our Certified Green initiative program, if eligible, we will send a Membership Certificate in a PDF format by email.

Yes, I would like to sign up to the AZSAFE+Clean program. Yes, I would like to learn more and receive a printed Membership Certificate.

AZITA has estimated that the partial of its appual dues which are non-deductible due to labbuing avgraditures is 200/ per salander year. The remaining dues may be tay deductible as