



Tourism Partner Application

COMPANY INFORMATION & PRIMARY CONTACT

Company Name: _____

Primary Contact Name: _____ Title: _____ Email: _____

Company Address: _____

City: _____ State: _____ Zip Code: _____ Website: _____

Phone: _____ Toll Free: _____ Fax: _____

ADDITIONAL CONTACTS (if applicable; add additional sheet if necessary)

Name: _____ Title: _____ E-Mail: _____

Name: _____ Title: _____ E-Mail: _____

PRODUCT/SERVICE DESCRIPTION (This description will be used on the AzLTA website)

Please provide a 25 – 30 word description of your company's product/service: _____

AzLTA Tourism Partner Investment Levels

***DMO/CVB/Chamber/City,
State or Govt. Municipality
(Annual Operating Budget):***

- Under \$250,000 \$350
- \$250,000-\$500,000 \$500
- \$500,000-\$1 million \$1,000
- \$1 to \$2.5 million \$2,500
- \$2.5 to \$5 million \$5,000
- \$5 to \$7.5 million \$7,500
- \$7.5 to \$10 million \$10,000

Tourism Business/Corporation

(Number of Employees):

- 1-50 Employees \$350
- 51-99 Employees \$500
- 100-200 Employees \$1,000
- 200-250 Employees \$2,000
- 250+ Employees \$2,500

PAYMENT INFORMATION

Billing Contact: _____ Title: _____

Types of Payment: Check Enclosed (Please make payable to: Arizona Lodging & Tourism Association)

Credit Card: American Express Master Card Visa

Account #: _____ **Expiration Date:** _____ **Billing Zip Code:** _____ **Security Code:** _____

Cardholder: _____ **Signature:** _____

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

In compliance with the OMNIBUS RECONCILIATION ACT OF 1993, it is estimated that 75% of your membership dues are fully deductible as a business expense. The remaining 25% is related to legislative advocacy activities and is not deductible. Further information regarding this law should be obtained from your tax advisor.