

2017 Corporate Membership Application

Corporate Executive representing a Brand, Owner or Management Company

MEMBERSHIP INFORMATION

Company Name:				
CEO Name:				
	act Name: Title:			
	Direct Phone:			
Address:				
City:	State:	Zip Code:	Phone:	
			Fax:	
Complete all that apply				
# OF PROPERTIES YOUR COMF # OF YOUR FRANCHISE PROPE LIST OF PROPERTIES: Attach a li	PANY MANAGES IN COLORADO:PANY OWNS IN COLORADO: RTIES IN COLORADO: ist of properties, including property of rooms at each property. Indicate	# OF ROOMS Y y name, address, city,	YOUR COMPANY MANAGES IN COLORADO: YOUR COMPANY OWNS IN COLORADO: state, zip code, phone, fax, general manager's name, and re to be included for membership.	
MAILING/BILLING INFORMATION	(If different than Primary Contact)			
Company:	mpany: Contact Name:			
	State: Zip			
PLEASE NOTE: All lod A certain percentage of you below; please select the on If you have one to five p If you have six to ten pu If you have eleven or m	the Colorado Hotel & Lodging Association are not dedused for lobbying purposes. For the current year, \$67. merican Hotel & Lodging Association (AHLA). Iging members are required to paur properties or rooms must be in mene that applies. properties, 75% of the total number roperties, 50% of the total number of the properties, 40% of the total number of the properties of the properties of the total number of the properties of the total number of the properties of the total number of the properties of the properties of the total number of the properties of the total number of the properties of the properties of the total number of the properties of the total number of the properties of the properties of the total number of the properties of	y a \$100 mandatory on the properties must be	CHLA members* st be CHLA members*	
Billing Contact: 🗖 Primary Contac	☐ Check Enclosed (Make pay ct ☐ Billing Contact in Accounting De ☐ MasterCard ☐ VISA ☐ Discove	ept.:	el & Lodging Association)	
Card Number:		Expiration Date: Code:		
			ect until written notification from me is received by CHLA.	
Cardholder:		Signature:		

Dues are payable in advance and membership is continuous unless cancelled in writing. Cancellations are effective 30 days following receipt of such notice.