

**MEMBERSHIP APPLICATION (please attach a copy of City of Avalon Business License)**

I, the undersigned, hereby apply for membership in the Catalina Island Chamber of Commerce & Visitors Bureau

I understand that dues, contributions or gifts to the Catalina Island Chamber of Commerce & Visitors Bureau are not tax deductible as charitable contributions. I also understand that they may be tax deductible as ordinary and necessary business expenses, and that I should seek the advice of a tax advisor regarding the deductibility of these contributions.

Name of Business \_\_\_\_\_

Mailing Address \_\_\_\_\_

Street Address \_\_\_\_\_

Phone No \_\_\_\_\_ FAX No \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Web site: \_\_\_\_\_

No. of Employees/seats/units/passengers \_\_\_\_\_ Date of Establishment \_\_\_\_\_

Type of Business \_\_\_\_\_

Name of Owner \_\_\_\_\_ Name of Manager \_\_\_\_\_

Address, if different from above: \_\_\_\_\_ FEES ATTACHED: \_\_\_\_\_

\_\_\_\_\_ Dues: \$ \_\_\_\_\_

\_\_\_\_\_ Admin Fee: \$ 30.00

\_\_\_\_\_ TOTAL: \$ \_\_\_\_\_

Signature \_\_\_\_\_

For Office Use Only:

- Accommodation ▪ Restaurant ▪ Transportation ▪ Bank/Utility ▪ Business ▪ Community
- Friend of the Chamber

Accepted at a Board of Directors Meeting held on: \_\_\_\_\_

Account No. \_\_\_\_\_ ▪ CRM ▪ Billing ▪ Welcome Letter

Yearly Dues: \_\_\_\_\_ ▪ Plaque ▪ Bus Lic ▪ Constant Contact

Date Received: \_\_\_\_\_ ▪ Web Listing & Image/Logo