



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

I, the undersigned, hereby apply for membership in the Love Catalina Island Tourism Authority.

I understand that dues, contributions or gifts to the Love Catalina Island Tourism Authority 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.

Business Name _____

Mailing Address _____

Street Address _____

Phone _____ E-Mail Address _____

Accounting contact _____ E-Mail Address _____

Web site: _____

No. of Employees/seats/units/passengers _____ Date of Establishment _____

Type of Business _____

Name of Owner _____ E-Mail Address _____

Name of Manager _____ E-Mail Address _____

Address, if different from above:

FEES ATTACHED:

_____	Dues:	\$ _____
_____	Admin Fee	\$ 35.00
_____	Total:	\$ _____

Signature _____

For Office Use Only:

Accommodation	Restaurant	Transportation	Bank/Utility	Business
Community	Friend of Love Catalina Island			

Accepted at a Board of Directors Meeting held on: _____

Account No. _____	CRM	Billing	Welcome Letter
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Yearly Dues: _____	Plaque	Bus Lic	Constant Contact
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Date Received: _____	Web listing & Image/Logo
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