



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 the Catalina Island Chamber of Commerce dba Love Catalina Island Tourism Authority is a 501(c)(6) nonprofit organization and that membership dues, contributions, or gifts are not tax-deductible as charitable contributions. However, they may qualify as ordinary and necessary business expenses. I understand that I should consult my tax advisor regarding the deductibility of these payments.

Business Name _____

Mailing Address _____

Street Address _____

Phone _____ E-Mail Address _____

Accounting contact _____ E-Mail Address _____

Web site: _____

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

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

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