



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.

Name of Business _____

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	\$	30.00
_____	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

Yearly Dues: _____ Plague Bus Lic Constant Contact

Date Received: _____ Web listing & Image/Logo