

Guam Hotel & Restaurant Association

MEMBERSHIP APPLICATION



Please detach this form, fill in the information and mail to GHRA with a check (payable to GHRA) or contact us for a credit authorization form for the appropriate amount to:
Guam Hotel & Restaurant Association
P.O. Box 8565 Tamuning, Guam 96931 | Telephone: 671.649.1447 | Facsimile: 671.649.8565
Email: info@ghra.org | Website: www.ghra.org

Today's Date: _____
Company / Organization Name: _____
aka or dba: _____
Company Anniversary Date: _____
GHRA Member of Record (Name): _____
Position / Title: _____
Business Location (Address): _____
Mailing Address: _____
Telephone: _____ **Facsimile:** _____
Email Address: _____ **Website:** _____

Membership Categories and Membership Dues (Annual):

Please only check one box for type of membership and applicable level of membership.

A. Active Member "Hotelier":

Please indicate actual number of rooms

- Less than 100 rooms = \$525.00 Flat Rate
- More than 100 rooms = Total Rooms X \$8.40
- Room under construction = Total Rooms X \$5.25
- Bed and breakfast/short term vacation rentals only more than 5 rooms = \$100
- Bed and breakfast/short term vacation rentals only less than 5 rooms = \$50

B. Active Member "Restaurateur":

Please indicate actual number of seats

- Less than 25 seats = \$150.00 Flat Rate
- 26 - 50 seats = \$350; 51-100 seats = \$525
- More than 100 seats = \$787.50
- Food trucks/ Peddlers = \$50

C. *Active Member "Allied":

For all Privately Owned Businesses, please indicate company annual revenues

- Less than \$5 Million in Annual Revenues = \$650.00
- Greater than \$5 Million but Less than \$7.5 Million in Annual Revenues = \$800.00
- Greater than \$7.5 Million but Less than \$10 Million in Annual Revenues = \$950.00
- Greater than \$10 Million in Annual Revenues = \$1,200.00

D. Affiliate Member "Associate":

For all Non-Profit Trade Organizations and Government Agencies = \$100

Please indicate Type of Business:

- | | | |
|--|--|---|
| <input type="checkbox"/> Advertising/Printing/Publications | <input type="checkbox"/> Financial Services | <input type="checkbox"/> Security |
| <input type="checkbox"/> Communications | <input type="checkbox"/> Health/Medical Services | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Computer Services | <input type="checkbox"/> Optional Tours | <input type="checkbox"/> Wholesale |
| <input type="checkbox"/> Construction/Landscaping | <input type="checkbox"/> Retail | <input type="checkbox"/> Other |
| <input type="checkbox"/> Consulting Services | <input type="checkbox"/> Sanitation | |
- Description of Services:** _____

MEMBERSHIP BENEFITS

- Business to Business Networking
- Training and Education Seminars
- Opportunities with seven GHRA committees
- Industry Scholarships
- Monthly Statistics
- Quarterly General Membership Meetings
- Hotelier & Restaurateur Meetings
- Annual Membership Directory
- Opportunities with annual events (e.g. PHARE, Taste Guam, Governor's Cup)
- Liaison with Government of Guam, Guam Legislature, Government Agencies, and Non-Government Organizations
- Advocating legislation and governmental regulations
- Improving industry relations
- Assistance during Disaster Recovery Efforts
- Affiliation with the American Hotel & Lodging Association (AHLA) including access to Educational Institute Discounts
- Affiliation with the National Restaurant Association (NRA)
- Marketing & Public Relations Programs
- Exposure on GHRA website
- 401K Retirement Plan
- Sports Leagues and special events

AGREEMENT TO (ACCEPTANCE OF TERMS & CONDITIONS):

This membership application shall not be binding until it is accepted and approved in writing by the board of Directors of the Guam Hotel and Restaurant Association.

Your membership will automatically renew by the 31st of December of each member year. Requests for discontinuation must be made in writing, but you will be responsible for dues owed for each calendar year of membership.

In witness whereof, applicant has caused this application to be read and signed by an officer of the company or person duly authorized. Execution of this application signifies full understanding and acceptance of all terms and conditions of the 'Articles of Incorporation and Bylaws of the Guam Hotel and Restaurant Association' including but not limited to the fully payment of dues and fees as assessed.

NAME (PRINT) OF AUTHORIZED REPRESENTATIVE:

SIGNATURE OF AUTHORIZED REPRESENTATIVE:

DATE SIGNED: _____