Guam Hotel & Restaurant Association





MEMBERSHIP BENEFITS

DATE SIGNED:

(payable to GHRA) or contact us for Guam Hotel & Restaurant Association	Telephone: 671.649.1447 Facsimile: 671.649.85	Opportunities with seven GHRA committees
Today's Date:		Annual Membership DirectoryOpportunities with annual events (e.g.
Company / Organization Name:		Golden Latte & HERO Awards, PHARE, GHRA Social, Tourism Cup)
		Liaison with Government of Guam, Guam Legislature, Government Agencies, and
		Non-Government Organizations
		Advocaling legislation and governmental
_		 Improving industry relations Assistance during Disaster Recovery Efforts
_		Affiliation with the American Hotel &
		Lodging Association (AHLA) including access to Educational Institute Discounts
Telephone:		Affiliation with the National Restaurant
Email Address:	Website: [Marketing & Public Relations Programs Exposure on GHRA website and social
Membership Categories and Membership Dues (Annual): Please only check one box for type of membership and applicable level of membership.		 sports Leagues and special events 3-month Digital signage promotional package with Vantage Advertising
A. Active Member "Hotelier": Please indicate actual number of rooms Less than 100 rooms = \$600.00 Flat Rate More than 100 rooms = Total Rooms X \$9.25 Room under construction = Total Rooms X \$5.80 Bed and breakfast/short term vacation rentals more than 5 rooms = \$100 Bed and breakfast/short term vacation rentals less than 5 rooms = \$50		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.
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		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.
C. *Active Member "Allied": [_] For all Privately Owned Businesses, please indicate company annual revenues [_] Less than \$250,000 in Annual Revenues = \$200.00 [_] Less than \$5 Million in Annual Revenues = \$700.00 [_] Greater than \$5 Million but Less than \$7.5 Million in Annual Revenues = \$850.00 [_] Greater than \$7.5 Million but Less than \$10 Million in Annual Revenues = \$1,000.00 [_] Greater than \$10 Million in Annual Revenues = \$1,250.00		
D. Affiliate Member "Associate": [_] For all Non-Profit Trade Organizations	and Government Agencies = No Charge	Name (Print) of Authorized Representative:
Please indicate Type of Business:		NAME (FRINT) OF AUTHORIZED REPRESENTATIVE:
[] Communications [] Computer Services [] Construction/Landscaping	[] Financial Services [] Security [] Health/Medical Services [] Transportation [] Optional Tours [] Wholesale [] Retail [] Other [] Sanitation	SIGNATURE OF AUTHORIZED REPRESENTATIVE: