



Independent
Lodging
Industry
Association

ILIA Membership Application

I hereby apply to join ILIA as an annual member.

Membership is valid for 12 consecutive months—expires on your anniversary date.

Please select your membership category below.

- Independent Hoteliers** — ~~\$125~~ only \$75
Special Introductory Membership
- Hotel Management Firm** — \$750
Up to eight (8) managed properties receive automatic membership – over eight, contact us.
- Non-Independent / Franchise** — \$1500
- Tourism Professional** — \$99
- Education, Faculty, Student** — \$50

Please Print All Information Clearly and Legibly

PRIMARY CONTACT _____

SECONDARY CONTACT (if applicable) _____

PROPERTY / COMPANY NAME _____

PROPERTY ADDRESS _____

CITY _____ STATE _____ ZIP _____

DAYTIME PHONE (____) _____ FAX (____) _____

WEB SITE _____ E-MAIL _____

PROPERTY DESCRIPTION - *approx. 25 words:* _____

If your membership is **HOTEL MANAGEMENT FIRM**, please list all managed properties below.

Investment

Please make membership investment payable to: **Independent Lodging Industry Association (ILIA)**

**After the application is processed, your credit card information will be destroyed.*

ANNUAL MEMBERSHIP INVESTMENT \$ _____

Check enclosed for \$ _____ or charge my   

Card Number _____ Expiration Date _____

Cardholder's Name _____ Card Security Code _____

APPLICANT'S SIGNATURE _____ DATE _____

Note: Membership investments are not deductible as charitable contributions, but may be deductible as an ordinary and necessary business expense. A portion of the investment, however, is not deductible as an ordinary and necessary expense to the extent that ILIA engages in lobbying. The non-deductible portion is estimated to be 16 percent.

Please mail, fax or e-mail your application / payment* to:

Mail: Independent Lodging Industry Association (ILIA), 1017 L Street • #527 • Sacramento, CA • 95814-3805

Fax: (916) 686-1321 **E-mail:** info@independentlodging.org

Phone: 916/925-2915 • www.independentlodging.org