



# ASSOCIATE MEMBER APPLICATION

ASSOCIATE MEMBERS . . . . . \$500  
*(above rate effective July 1, 2011 – June 30, 2012)*

Company Name: \_\_\_\_\_

Name/Title of Person to Receive Correspondence: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Web Address: \_\_\_\_\_

County (if within PA): \_\_\_\_\_

20-word description of your company's products/services: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

*The above signed hereby agrees to abide by the Articles of Incorporation and By-Laws, and to support the goals and objectives of the PA Tourism & Lodging Association .*

**Return to: PA Tourism & Lodging Association  
128 Walnut Street  
Harrisburg, PA 17101  
FAX 717-232-8948**



<b>PAYMENT INFO:</b>																					
<b>Amount enclosed: \$</b> _____																					
<b>METHOD OF PAYMENT</b>																					
<input type="checkbox"/> Check/Money Order <i>Make checks payable to PA Tourism &amp; Lodging Association</i>																					
<input type="checkbox"/> American Express	<input type="checkbox"/> VISA																				
<input type="checkbox"/> Mastercard	<input type="checkbox"/> Discover																				
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Expiration Date                      Verification Code																					
Cardholder's Signature _____																					
Credit Card Billing Address _____																					
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