

APPLICATION FOR MEMBERSHIP

BUREAU NAME:			
PRIMARY CONTACT:	POSITION:		
SECONDARY CONTACT:	POSITION:		
ADDRESS:			
CITY:	STATE:	_ ZIP:	
COUNTY:	FAX #:		
BUSINESS PHONE:	TOLL FREE:		
WEBSITE:			
PRIMARY CONTACT EMAIL ADDRESS:			
BUREAU MISSION STATEMENT:			
DATE OF ORGANIZATION INCEPTION	;		
ARE YOU THE RECOGNIZED ENTITY TO	<i>(MONTH)</i> O PROMOTE YOUR COUNTY/CITY? _		NO
Please include a copy of your county	ordinance and/or county resolution	١.	
ANNUAL BUDGET:			
AMOUNT SPENT ON DESTINATION M	IARKETING:		
PERCENT OF INNKEEPER'S TAX COLLE	ECTED:		
PERCENT OF INNKEEPER'S TAX RECEI	VED BY YOUR BUREAU:		
If innkeeper's tax is divided, please sh	now a breakdown below:		
COMMUNITY/COLINITY/CITY DODLILA	TION: # OF LIGHT!	/NACTEL DOOM	



LIST ALL TOURISM-RELATED ORGANIZATIONS TO WHICH YOUR BUREAU BELONGS:		
NUMBER OF PAID FULL-TIME STAFF:		
LIST ALL PAID FULL-TIME STAFF POSITIONS:		
NUMBER OF PAID PART-TIME STAFF:		
LIST PAID PART-TIME STAFF POSITIONS:		
LIST ALL OTHER STAFF POSITIONS (INCLUDE VOLUNTEER POSITIONS):		
WHAT DOES YOUR BUREAU WISH TO GAIN THROUGH MEMBERSHIP IN ITA?		

RETURN THIS COMPLETED FORM WITH:

- 1. DUES (see attached page for cost)
- 2. COUNTY ORDINANCE AND/OR COUNTY RESOLUTION
- 3. LETTERS OF RECOMMENDATION FROM TWO CURRENT ITA MEMBERS

PLEASE MAIL OR SCAN AND EMAIL TO:

Carrie Lambert (carrie@indianatourismassociation.com)
Indiana Tourism Association
PO Box 55456
Indianapolis, IN 46205



2015 Membership Dues

Indiana Tourism Association annual dues are based on the CVB 2014 annual budget. Please use the table below to determine the correct dues amount:

Bureau Annual Budget	<u>2014 Dues</u>
< \$100,000	\$650
\$100,000 - \$249,000	\$780
\$250,000 - \$499,999	\$1,040
\$500,000 - 749,999	\$1,690
\$750,000 - \$999,999	\$2,340
\$1,000,000-\$1,499,999	\$2,860
\$1,500,000-\$1,999,999	\$3,250
> \$2 million	\$3,640

Our 2015 annual budget is \$______
Therefore, our 2015 dues are \$_____