

## 2024 Membership Application Form: **ACTIVE**

Name of Establishment:	
Type of Accommodation:	
CEO/Managing Director/GM: (Representative in AHATA)	
E-mail of Representative:	<del></del>
Address:	
Telephone:	
Website:	
We are applying for Active membership to the Aruba Hotel & Tourism hotel performance data (confidentially to AHATA CEO) and to pay the association:	
<ol> <li>New Member Registration Fee: US\$ 280.00 (one-time paym</li> <li>Membership Fee: US\$3,000 per year (Applicable for accomms</li> <li>CHTA Annual Membership Fee</li> <li>Monthly Membership Dues (AHATA Levy): US\$0.50 per sold to AHATA on monthly basis - Accompanied by Government</li> </ol>	modations with 25+ rooms)  room night, to be charged to guests, payment
<ol> <li>Vacation Rental:         <ol> <li>New Member Registration Fee: US\$ 280.00 (one-time paym</li> <li>Membership Fee: US\$3,000 per year (Applicable for accomm</li> </ol> </li> <li>Monthly Membership Dues (AHATA Levy): US\$0.50 per sold to AHATA on monthly basis - Accompanied by Government</li> </ol>	modations with 25+ rooms) room night, to be charged to guests, payment
Timeshare Hotels:  1. New Member Registration Fee: US\$ 280.00 (one-time paym  2. Membership Fee: US\$5,000 per year + CHTA Annual Membership	· · · · · · · · · · · · · · · · · · ·
2. Weinbership ree. 03,33,000 per year + CITA Aimaa Weinbe	eranip i ee
Name:	
Signature: Date:	
For AHATA use only Date handled by Board: Approved / Declined Payment Received: Yes N	 lo:











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## **PROFILE**

1.	Describe your business (EP, All-inclusive, time-share, vacation rental, target market, etc):	
2	Number of Employees. FT: PT:	
	Number of Rooms/Units:	
4.	Key Contact Persons (name and e-mail address):  General Manager:  Sales/Marketing:  Revenue Manager:  Accounting:  Executive Assistant:  Human Resources:  Who will provide monthly performance data:	
5.	What motivated your company to become a member of AHATA:	
	Educational Interest: Personal Development (i.e. time management, etc) Sales & Marketing Customer Service Leadership Technology Finance & Business Operations Wellbeing (i.e. stress management) Other:	

## <u>Please submit the following documents with the application form:</u>

- Copy of I.D.
- **Registration Chamber of Commerce**
- Digital Logo & Pictures







