



2026 Membership Application Form:

ACTIVE MEMBERSHIP

Name of Establishment: _____

Type of Accommodation: _____

CEO/Managing Director/GM: _____
(Representative in AHATA)

E-mail of Representative: _____

Address: _____

Telephone: _____

Website: _____

We are applying for Active membership to the Aruba Hotel & Tourism Association and agree to provide monthly hotel performance data (confidentially to Deloitte and AHATA CEO) and to pay the following membership dues to the association:

Transient Hotels and Vacation Rental:

1. New Member Registration Fee: US\$ 280.00 (one-time payment)
2. Membership Fee: US\$3,000 per year (Applicable for accommodations with 25+ rooms)
3. CHTA Annual Membership Fee (not applicable for Vacation Rental).
4. Monthly Membership Dues (AHATA Levy): US\$0.50 per sold room night, to be charged to guests. Payment to AHATA on monthly basis, accompanied by Government Tourism Levy payment form.

Timeshare Hotels:

1. New Member Registration Fee: US\$ 280.00 (one-time payment)
2. Membership Fee: US\$5,000 per year + CHTA Annual Membership Fee

Name: _____

Signature: _____ Date: _____

For AHATA use only
Date handled by Board:
Approved / Declined

Payment Received: Yes___ No: __



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ahata.com



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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: _____

3. Number of Rooms/Units: _____

4. Key Contact Persons (name and e-mail address):

General Manager: _____
Sales/Marketing: _____
Revenue Manager: _____
Accounting: _____
Executive Assistant: _____
Human Resources: _____
Person that will fill out monthly hotel data: _____

5. What motivated your company to become a member of AHATA:

6. Educational topics of interest (for workshops etc):

Please submit the following documents with the application form:

- ☐ Copy of Hotel or Lodging License
- ☐ Copy of I.D. of Representative
- ☐ Registration Chamber of Commerce
- ☐ Digital Logo & Pictures

