



BAHAMAS HOTEL & TOURISM ASSOCIATION

TIN: 100436600

P.O. Box N 7799

Nassau, The Bahamas

Telephone: (242) 605-8126

Email: bhta@bahamashotel tourism.org

ALLIED MEMBER APPLICATION

Allied membership shall be open to purveyors of merchandise and services to hotels. An Allied Member shall pay dues annually of Three Hundred and Eighty-five (\$385.00) Dollars. ***Dues for the first fiscal year must accompany application.***

I hereby apply for Allied Membership in The Bahamas Hotel & Tourism Association (BHTA) and submit hereto relevant information needed for the approval and processing of my application:

PLEASE TELL US ABOUT YOUR COMPANY

Name of Company: _____ TIN: _____

Type of Business: _____

Business License: _____

Physical Address: _____

Mailing Address: _____

Telephone Number: _____ Fax Number: _____

Website: _____

CONTACT PERSON

Last Name: _____ First Name: _____

Job Title: _____

Email: _____ Alternative Email: _____

Telephone №: _____ Fax: _____ Cell №: _____

Recommended for Membership by: _____

Signature: _____ Date: _____

FOR OFFICIAL USE ONLY:

Articles of Association:

Section V, Fees, Dues and Assessments

Article 15

An Allied Member shall pay annual dues of \$350.00 + 10% = **\$385.00**

Application Approved

Application Denied

Date: _____