



**ENJOY THE BENEFITS OF ALL THREE MEMBERSHIPS FOR ONLY \$1500 PER YEAR**

# Join Three Associations and Market to Hoteliers in Los Angeles, San Diego, and California Statewide for One Low Price

Your joint membership includes all the benefits below:

## CHLA VENDOR MEMBERSHIP BENEFITS

INDIVIDUALLY-PRICED ANNUAL MEMBERSHIP \$1000

- CHLA Property Member List
- CHLA Logo for Marketing Materials
- Complimentary Company Listing in Bi-Monthly *California Lodging News Magazine*
- Complimentary Listing on CHLA's Online Buyer's Guide at [www.calodging.com](http://www.calodging.com)
- Monthly ADR & Occupancy Reports from STR
- Quarterly Construction & Renovation Reports
- Weekly CHLA e-Newsletter, Unlimited Subscriptions
- Exhibitor Discounts to CHLA Events & Sponsorships:
  - Legislative Action Summit
  - Northern CA Conference & Trade Show
  - Southern CA Conference & Trade Show
  - Educational California Regional Seminars
  - Annual Meeting & Stars of the Industry Awards
  - CABBI InnSpire Conference & Marketplace
- Reduced Advertising Rates in CHLA Publications
- Discounted Member-Exclusive Programs: Credit Card Processing, Payroll Services, Office Supplies, Shipping, Healthcare Discounts and Solutions (Telemedicine)



*CABBI Vendor Membership included upon request*

## HALA & SDCLA VENDOR MEMBERSHIP BENEFITS

INDIVIDUALLY-PRICED ANNUAL MEMBERSHIP \$500 | \$695 HALA | SDCLA

- Association Property Member List
- Sponsorship Opportunity for Regional Events
- Complimentary Vendor Listing on Association Websites
- Association Logo for Marketing Materials
- Social Media Updates



**CONTACT INFORMATION:**

Erika Costa, Partnership Manager  
916-554-2665 | [erika@calodging.com](mailto:erika@calodging.com)



# VENDOR MEMBERSHIP APPLICATION

## ORGANIZATION INFORMATION

Organization: \_\_\_\_\_

Mr.  Ms. \_\_\_\_\_

Title: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Toll Free: \_\_\_\_\_ Fax: \_\_\_\_\_

Website: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Mailing Address (If different than above): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Toll Free: \_\_\_\_\_ Fax: \_\_\_\_\_

## REPRESENTATIVE TO BE LISTED IN PUBLICATIONS AND ONLINE *(One only)*

Mr.  Ms. \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

I agree to receive official communications from, and to send official communications to, CHLA, SDCLA and/or HALA via email.

*Please contact us to add additional contact names to your membership account.*

## COMPANY/PRODUCT DESCRIPTION\* *(Please, 50 words or less)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*\*We reserve the right to edit descriptions at its sole discretion.*

## BUSINESS CATEGORY

Please include two keywords or business categories that will be used as a tool for guests to search the online CHLA Buyer's Guide for your product and or services. For more options please contact Erika Costa.

*Please email a high-resolution JPG version of your company logo to [erika@calodging.com](mailto:erika@calodging.com) to be included in your online buyer's guide listing.*

## MEMBERSHIP AND PAYMENT INFORMATION

Select Membership:

HALA, SDCLA, CHLA AND CABBI (\$1500)

HALA (\$500)

SDCLA (\$695)

CHLA AND CABBI (\$1000)

### Billing Contact:

Same as Primary Contact

Billing Contact Name: \_\_\_\_\_

Title: \_\_\_\_\_

Email: \_\_\_\_\_

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

Amount Due: \_\_\_\_\_

### Payment Method:

Check Enclosed

*(Make payable to: California Hotel & Lodging Association)*

Credit Card

AMEX  Discover  MasterCard  VISA

Account #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ CVV: \_\_\_\_\_

Billing Zip Code: \_\_\_\_\_

Cardholder: \_\_\_\_\_

Signature: \_\_\_\_\_

*Dues are payable in advance and membership is continuous unless cancelled in writing. Cancellations are effective 30 days following receipt of such notice.*

