

OHLA Allied Membership Application

Type of Member			<u>Partnership D</u>	Partnership Dues		
☐ Allied Member Any organization partnering with Ohio's lodging indus			\$500			
	Convention & Visitors Bureau wit	h:				
	☐ An annual budget of \$250,0	000+	\$400			
\square An annual budget of less than \$250,000			50,000 \$250			
☐ Industry Educator/Student			\$20			
Company Information					Invoice #:	
Compar	ny Name:		County: _			
Address:			City, State	e, Zip: _		
Company Website:			Company	/ Phone	#:	
Compar	ny Slogan/Motto:					
Compar	ny Description (100 Words or Less):				
Compar	ny Category (Select only <u>one</u>):					
	Advertising				Managed Care Organization	
	Air Conditioning/Heating Architects/Engineers		Energy Consultant Energy Management		Office Equipment/Supply Online Job Bank	
	Associations		Energy Suppliers		Online Travel Company	
	Attorneys		Feasibility Studies/Appraisals		Parking & Hotel Services	
	Attractions		Financial		Pest Prevention/Elimination	
П	Audio-Visual Services	П	Fire Protection Services	П	Powerwash	
	Barter		Food Purveyor		Printing & Publishing	
			<u>~</u>			
	Brochure Distribution		Furniture Donation Bank		Real Estate Brokerage	
	Carpet Cleaning		Gov't Affairs Consulting		Security Services	
	Commercial Builders		~			
			Hospitality Staffing		Signage	
	Communications/Internet/Cable & Direct TV		Hospitality/Facilities Maintenance Supply		Strategic Planning & Care	
	Construction		Hotel Management Group		Tradeshow Exhibits	
	Contraction - Renovation/FFE					
	Install		Housekeeping/Cleaning/Laundry Supplies		Training	
	Convention & Visitors Bureaus		Insurance/Health		Travel Publications	
	Convention Center		Insurance/Property		Urgent Care	
	Credit Card/Payroll Gift Cards		Interior Design/FFE/Window		Workers' Comp. Solutions	
	Design-Build Construction		Covering Laundry Equipment & Service			
	Design-Build Construction Disaster Restoration		· · ·			
			Laundry/Linen Services			
	Education		Lodging Statistics			

Billing Information	
Contact Name:	Title:
Company Name:	
Address:	City, State, Zip:
Point of Contact	
Direct Contact Name:	Direct Contact Phone #:
Cell Phone #:	Email Address:
Doing Business with OHLA M	<u>lembers</u>
Ohio's hospitality industry. This is hospitality industry, and make oth	al lodging council meetings to receive relevant, up-to-date information regarding a great opportunity to meet with decision-making hoteliers, show your support of the ter beneficial connections within the organization. OHLA submits notices of each il. Please complete the following section to receive these meeting alerts.
	reater Akron LC, Greater Cincinnati LC, Greater Cleveland LC, Greater Columbus LC, iio LC, and Unique Lodging of Ohio (ULO) Council
Additional Contact 1	
Name:	Title:
Phone #:	Email Address:
Lodging Council Notifications:	
Additional Contact 2	
Name:	Title:
Phone #:	Email Address:
Lodging Council Notifications:	
Additional Contact 3	
Name:	Title:
Phone #:	Email Address:
Lodging Council Notifications:	
application has been ap	a Non-Disclosure Agreement to receive the exclusive OHLA Hotel Member List
	HOW TO SUBMIT:
	ns electronically to OHLA's Director of Membership, Halle Runion, at halle@ohla.org UESTIONS? Please contact OHLA at (614) 461-6462
FOR OFFICE USE ONLY: Date Received: Received by:	Date Payment Received: Date Kit Submitted: Date Input in System: Date Ambassador Assigned: