



# 2018 Allied Membership Application

*Those that provide products & services to the industry*

## Type of Membership

Full Service Allied Membership

Select Service Allied Membership

## Partnership Dues

☐ \$750

☐ \$525

## Company Information

Company Name: \_\_\_\_\_ County: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

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

Slogan/ Motto: \_\_\_\_\_

Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Company Category\*: \_\_\_\_\_

## Point of Contact

Contact Name & Title: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Appropriate Lodging Council Notification: ☐ Akron/Canton ☐ Columbus ☐ Cincinnati ☐ Northwest Ohio ☐ Cleveland ☐ Dayton

Billing Address: (if different from Company Address)

\_\_\_\_\_

## Additional Contact 1

Contact Name & Title: \_\_\_\_\_ Email: \_\_\_\_\_

Appropriate Lodging Council Notification: ☐ Akron/Canton ☐ Columbus ☐ Cincinnati ☐ Northwest Ohio ☐ Cleveland ☐ Dayton

## Additional Contact 2

Contact Name & Title: \_\_\_\_\_ Email: \_\_\_\_\_

Appropriate Lodging Council Notification: ☐ Akron/Canton ☐ Columbus ☐ Cincinnati ☐ Northwest Ohio ☐ Cleveland ☐ Dayton

\*OHLA will use this entry to determine best placement in Allied Directory

Thank you for submitting your Allied Member Application! We will begin the review process for your membership. All new members must be approved by the OHLA Board before membership is finalized.

Member Benefit	Select Service	Full Service
OHLA eNewsletter Introduction to Membership <ul style="list-style-type: none"> <li>• Receive monthly OHLA eNewsletter</li> <li>• Eligible to submit content to eNewsletter</li> <li>• Eligible for Allied Spotlight in eNews</li> </ul>	✓ ✓ ✓	✓ ✓ ✓ ✓
Unique OHLA E-introduction & Co-branded Email & Mail Support		✓
One-on-one Membership Consultation		✓
Maximize Membership FAQ/Guide	✓	✓
OHLA Member Contact List with City <ul style="list-style-type: none"> <li>• Eligible for OHLA Full Member Contact information*</li> </ul>		✓ ✓
Listing in OHLA Allied Directory <ul style="list-style-type: none"> <li>• Company name</li> <li>• Company logo</li> <li>• Company description</li> <li>• Company contact</li> <li>• OHLA Member offer</li> <li>• Testimonial</li> <li>• Slogan</li> </ul>	✓ ✓ ✓ ✓ ✓	✓ ✓ ✓ ✓ ✓ ✓ ✓
Use of OHLA Allied Member Logo	✓	✓
Eligible to serve on OHLA committees including Allied Council		✓
Eligible to exhibit at Annual Conference <ul style="list-style-type: none"> <li>• Eligible for OHLA Allied of the Year</li> <li>• Priority Exhibit Space at Annual Conference</li> </ul>	✓ ✓	✓ ✓ ✓
Attendance at all Lodging Council Business Meetings <ul style="list-style-type: none"> <li>• Member Pricing</li> <li>• One (1) Complimentary Registration for Lodging Council Breakfast or Luncheon</li> <li>• Invitations to all Lodging Council Breakfasts, Luncheons and Receptions</li> </ul>	✓ ✓	✓ ✓ ✓ ✓
Industry/Government Affairs Collaboration		✓
Sponsorships Available	✓	✓
Attendance to Allied Industry Insights <ul style="list-style-type: none"> <li>• Two complimentary registrations</li> </ul>	✓	✓ ✓

\*Additional sponsorship required

### HOW TO SUBMIT:

Submit completed applications by email to OHLA's Director of Membership, Halle Markwas at [halle@ohla.org](mailto:halle@ohla.org)

**QUESTIONS? Please contact OHLA at (614) 461-6462**

#### FOR OFFICE USE ONLY:

One on one scheduled: \_\_\_\_\_ Date Payment Received: \_\_\_\_\_ New Member Kit: \_\_\_\_\_ SM Shoutout: \_\_\_\_\_  
 Date Received: \_\_\_\_\_ Date Input in System: \_\_\_\_\_ Ambassador Assigned: \_\_\_\_\_ Letter: \_\_\_\_\_