

Affiliate Membership Application* 2010

COMPANY INFORMATION:

Company Name			
Mailing Address			
City	State or Province	Postal/Zip Code	Country
Main Contact Name		Main Contact Title	
Telephone (Please include extension)		Fax	
Email		Company Web Site	

***Affiliate Members:** Available only for industry home owners associations (HOA, POA, COA, etc), public agencies, libraries, colleges, universities, & all resort developers/vendors not marketing or having offices within North America (Canada, Mexico or US territories). Dues are reduced to encourage participation from these organizations. Yearly dues include member discounts for all of your company's representatives.

PAYMENT INFORMATION: DUES:

Class:	<input type="checkbox"/> Class S	<input type="checkbox"/> Class P	<input type="checkbox"/> Class I
Type:	Home Owners Association (HOA), Property Owners Association (POA)	Public Agencies, Officials, Associations, Universities	International, Companies not marketing or having offices in North America or US territories
Dues:	\$300	\$260	\$615

Charge My Credit Card

American Express Master Card VISA

Card Number	Expiration Date
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Name on Card	Signature
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Check Enclosed Check Number _____

While contributions or gifts to ARDA are not deductible as charitable contributions for federal income tax purposes, they may be deductible as ordinary and necessary trade or business expenses. We estimate that 13.66% of members' 2010 dues will be allocable to lobbying and political expenses. Therefore, you should deduct only the remaining 86.34% of your ARDA dues for federal tax purposes.

INDUSTRY REFERENCE

Name: _____ Company: _____

ARDA and its members are committed to the highest standards and ethics in resort, vacation, recreational, residential and community development for the benefit of the public. To demonstrate that commitment, ARDA has adopted its Code of Ethics with which all members and all those who use ARDA services agree to comply.

ARDA CODE OF ETHICS

Now and in the future, I have read and agree on behalf of my company to observe and abide by the *ARDA Code of Ethics*.

Signature (Required): _____ Date: _____

The complete ARDA Code of Standards and Ethics can be found online at www.arda.org/EthicsCode

Please return application and payment to:
 American Resort Development Association
 1201 15th Street, NW Suite 400
 Washington, DC 20005
 Tel: (202) 371-6700 Fax: (202) 289-8544
membership@arda.org www.arda.org

Once your application has been received, a membership representative will contact you with additional information to maximize your benefits.
Questions? Contact: rgoodhope@arda.org