

# Core Member - Corporate

Corporate membership for resort developers, vacation clubs, sales & resale companies and resort property exchangers.

## Core Members Dues \$1,300-\$113,500

Annual dues are based on gross annual income in U.S. dollars from industry-related sales and leases.

Please select your primary business:

- Developer  
 Exchange Company  
 Fractional/PRC  
 Holding Company  
 Non Developer Sales/Marketing  
 Rental Company  
 Resale Company\*  
 Travel or Vacation Club  
 Other: \_\_\_\_\_

## Annual Membership Dues

Please select revenues from previous calendar year:

CLASS/REVENUES	DUES
<input type="checkbox"/> Class 1 \$1B+	\$113,500
<input type="checkbox"/> Class 2 \$800M-\$999M	\$91,000
<input type="checkbox"/> Class 3 \$700M-\$799M	\$78,500
<input type="checkbox"/> Class 4 \$600M-\$699M	\$68,500
<input type="checkbox"/> Class 5 \$500M-\$599M	\$57,000
<input type="checkbox"/> Class 6 \$400M-\$499M	\$45,500
<input type="checkbox"/> Class 7 \$300M-\$399M	\$34,500
<input type="checkbox"/> Class 8 \$200M-\$299M	\$29,000
<input type="checkbox"/> Class 9 \$100M-\$199M	\$22,500
<input type="checkbox"/> Class 10 \$50M-\$99M	\$17,000
<input type="checkbox"/> Class 11 \$25M-\$49M	\$11,500
<input type="checkbox"/> Class 12 <\$25M	\$5,900
<input type="checkbox"/> Holding Company	\$3,000
<input type="checkbox"/> International	\$1,300

Global Companies neither marketing to nor having offices in North America (Canada, Caribbean, Hawaii, Mexico, USA)

## Applicant Contact Information

Name	Title
Company	<input type="checkbox"/> Business <input type="checkbox"/> Residence
Mailing Address	
City   State/Province   Postal Code   Country	
Telephone	Fax
Email Address	Web Address

## Payment Options

Payment must accompany application to be processed.



- Check (payable to ARDA in U.S. dollars)

Check number: \_\_\_\_\_ AMOUNT: \$ \_\_\_\_\_

- American Express  Visa  MasterCard

<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Credit Card Number	Expiration Date

Print Name on Card	Today's Date
Authorized Signature	Authorization code for office use only

AMOUNT: \$ \_\_\_\_\_

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 10% percent of members' 2021 dues will be allocable to lobbying and political expenses. Therefore, you should deduct only the remaining 90% of your ARDA dues for federal tax purposes.

- Wire instructions email us at [membership@arda.org](mailto:membership@arda.org)

## How did you hear about us? Minimum 1 current ARDA member reference(Required)

My application will be reviewed and vetted by the Membership and Ethics Committee and I am expected to adhere to the Ethics Policy.

## \*Resellers, transfer companies and/or exit companies.

- I have completed the required Business Background Form as a reseller or transfer company.  
 A one time non-refundable deposit fee of \$2,500 will be charged and deducted from my \$5,900 Membership fee should my application be denied. The balance of my membership fee in the amount of \$2,500 will be returned to me promptly and I may reapply to ARDA after 12 months.

## ARDA Code of Standards & Ethics



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

- I acknowledge on behalf of the applicant that I have read, understand and agree to abide by the ARDA Code of Standards & Ethics.

The complete ARDA Code of Standards & Ethics can be found online at [www.arda.org/about-us/code-ethics](http://www.arda.org/about-us/code-ethics)

## Affiliate / Subsidiary Disclosure

Please list all affiliated/subsidiary companies (if any) of applicant doing business in the vacation ownership industry:

Please list all companies (if any) doing business in the vacation ownership industry in which the applicant or its principals are investors:

## Send application and payment to:

American Resort Development Association

Attn: Membership

1201 15th Street, N.W., Suite 400, Washington, DC 20005

p (202) 371-6700 f (202) 289-8544 e [membership@arda.org](mailto:membership@arda.org)



## REQUIRED MEMBERSHIP DOCUMENTATION Resale and Transfer Company Applicants

Please complete all items or attach the required information with reference to the applicable item number. If you believe an item to be inapplicable, please explain the reason why.

### **FOR ALL MEMBERS OR PROSPECTIVE MEMBERS:**

1. Legal name and physical address of the applicant:
  
2. List all fictitious names or DBAs:
  
3. Length of time the applicant has been doing business in this space:
  
4. List all website addresses currently used by the applicant for any aspect of the resale or transfer business:
  
5. Briefly describe your services and list the fees (or commission percentage) charged to customers for each service provided:
  
6. List the physical address of the company's headquarters (if different from #1 above) and list all individuals (principals) who own more than 10% of the company and any affiliates or subsidiaries:
  
7. List the state or states where the applicant and any affiliates or subsidiaries are incorporated and the date of incorporation:
  
8. List the full name and physical business address (if different from #1 or #5 above) of the real estate broker in charge, if applicable, and the state or states where the broker currently holds a real estate license:
  
9. List all other licenses and the states where they are held that are relevant to the conduct of the applicant's business (e.g. telemarketing, sellers of travel, etc.):

10. Attach a current and accurate copy of any contracts used by the applicant.
11. Attach a current and accurate copy of any telephone scripts used by the applicant for outbound telemarketing or in response to inbound inquiries from consumers.
12. Attach exemplars of any printed advertising (other than websites) used by the applicant during the last six months:
13. Provide a statement as to whether the applicant and its principals are currently or have, within the past five years, been subject to any enforcement actions by a government authority including local, state, or federal regulatory agencies. If so, please provide a description of those actions as well as a statement as to whether they have been resolved to the satisfaction of the regulatory agency.

**FOR TRANSFER COMPANY APPLICANTS ONLY:**

14. Provide a list of all companies and their physical addresses or individuals, if known, to which timeshare interests are or may be transferred.
15. Provide a complete description of the methods by which the timeshares transferred are used or disposed of.
16. Has the applicant ever transferred a timeshare interest to a person or entity that they knew did not have the ability, means, or intent to pay all assessments and taxes associated with ownership of the timeshare interest?

Submitted by: \_\_\_\_\_ Company: \_\_\_\_\_  
(Name)

Date submitted: \_\_\_\_\_

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**For ARDA Use Only**

Date Received:  
Disposition:

Review Completed: