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ADVENTURE TRAVEL
TRADE ASSOCIATION
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ANNUAL MEMBERSHIP APPLICATION FOR DESTINATION MARKETING ORGANIZATIONS & TOURISM BOARDS

MEMBER INFORMATION

Company Name		Website URL	
Purview	National (US \$1,500)	State/Provincial (US \$1,000)	City/Regional (US \$750)
Billing Address			
City	State/Territory	ZIP/Postal Code	Country
Mailing Address (if different)			
City	State/Territory	ZIP/Postal Code	Country
General Telephone Number		General Email Address	

PRIMARY CONTACT INFORMATION

First Name	Last Name
Job Title	
Telephone Number	Email Address

PAYMENT METHOD

PAYMENT MUST BE SUBMITTED WITH APPLICATION.

I've enclosed my check, numbered _____

Bill my Visa, Mastercard, American Express or Discover Card: ---

Name on Card _____

Signature _____

Expiration Date (MM/YY) /

Contact us for bank transfer information

PLEASE MAIL, FAX OR EMAIL TO

Adventure Travel Trade Association
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Seattle, WA 98101 - USA

Phone: 360-805-3131
Email: info@adventuretravel.biz
Fax: 360-805-0649

Learn. Partner. Grow.

