Alaska Hospitality Retailers Membership Application



Business Name:			
Contact Name:			
Physical Address:			
			Zip Code:
Mailing Address: (if differe	nt from above)		
City:		State:	Zip Code:
Office Phone:E		Business	s Phone:
Cell Phone:		Email:	
Form of Payment (include check #):			Amount Paid: \$
Signature:			Date:
	Type of Bu	ısiness (check all t	hat apply)
☐ Quick Service Restaurant ☐ F☐ Brewery ☐ H☐		☐ Brewpub ☐ Full Dispensary ☐ Hotel/Lodging	☐ Package Store ☐ Distributor/Wholesale ☐ Private Club
☐ Beer/Wine Restaura☐ Other:		☐ Catering	☐ Coffee Shop
Description	Annual Fee	Total	
Single location 2 locations	\$200 \$300		Our Mission: One Voice
3 locations	\$350		Only \$200 annual
4 locations	\$450		membership fee
5 or more locations	l \$550		

Note: Dues are not deductible as a charitable contribution, but it may be deductible as a business expense. However, it is estimated that 50% of dues are not deductible as a business expense because of certain lobbying activities by members. Please consult your tax advisor for the most current IRS tax code applicability.

Alaska Hospitality Retailers PO Box 242023 Anchorage, AK 99524 Office: (907) 646-4628 Fax: (907) 646-4028

Email:

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