



# Membership Application

Company \_\_\_\_\_  
 Date \_\_\_\_\_ Number of Employees \_\_\_\_\_ Billing Contact \_\_\_\_\_  
 Phone # \_\_\_\_\_ x \_\_\_\_\_ Fax # \_\_\_\_\_

Business Address \_\_\_\_\_  
 Mailing Address (if different) \_\_\_\_\_  
 Billing Address (if different) \_\_\_\_\_  
 Web Site Address \_\_\_\_\_ Type of Business \_\_\_\_\_  
 Primary Contact \_\_\_\_\_ E-Mail Address \_\_\_\_\_  
 Alternate Contact \_\_\_\_\_ E-Mail Address \_\_\_\_\_  
 Human Resource Director \_\_\_\_\_ E-Mail Address \_\_\_\_\_  
 Referred/sponsored by \_\_\_\_\_ Company \_\_\_\_\_  
 Does your company distribute in house publications? \_\_\_\_\_ If so, how often? \_\_\_\_\_ Distributed to your employees? \_\_\_\_\_  
 Would you distribute printed material from the Alliance to your employees if it was meaningful to your employees? \_\_\_\_\_

## MEMBERSHIP CONTRIBUTION

(Payable annually, with first year's investment and a one-time \$25 administration fee)

If you are **not** a property owner, bank, hotel, restaurant or associate - annual amounts would be based on total number of employees:

<b>Total number of employees in Tampa</b>		<b>\$</b>
( )	1 (Sole Owner- 0 emp)	220
( )	2 - 5	275
( )	6 - 10	385
( )	11 - 15	550
( )	16 - 30	825
( )	31 - 50	1,100
( )	51 - 100	1,650
( )	101 - 200	2,200
( )	201 +	2,750

<b>Banks / Credit Unions</b>		<b>\$</b>
( )	Unless property owners)	1,100

<b>Hotels</b>		<b>\$</b>
( )	Under 200 rooms	550
( )	201+ rooms	1,100

<b>Restaurants</b>		<b>\$</b>
( )	Under 100 seats	220
( )	101-200 seats	330
( )	201 + seats	550

( ) **Associate Membership \$550**

Vendors, contractors/subcontractors, providers of goods and services to Alliance members and business located outside of the Westshore Business District.

<b>Property Owner</b>		<b>\$</b>
( )	less than 1 acre	550
( )	1 acre to 2.499 acres	1,165
( )	2.5 acres to 4.99 acres	2,750
( )	5 acres to 9.99 acres	3,000
( )	10 to 19.99 acres	3,500
( )	20 acres or larger	4,000

Membership Investment \$ \_\_\_\_\_  
 One time administration fee \$ 25.00  
 Total amount due: \$ \_\_\_\_\_

**Send Application and payment payable to:  
Westshore Alliance**

3109 W. Dr. MLK, Jr. Blvd Suite 140  
 Tampa, FL 33607  
 (813) 289-5488 (813) 289-6727 Fax  
 www.WestshoreAlliance.org

Method of Payment: \_\_\_\_\_ Check Enclosed \_\_\_\_\_ Visa \_\_\_\_\_ MC \_\_\_\_\_ AM EX \_\_\_\_\_ Other  
 Card# \_\_\_\_\_ Exp date: \_\_\_\_\_ CV2 Code \_\_\_\_\_ Billing Zip code \_\_\_\_\_  
 Print Name \_\_\_\_\_ Signature: \_\_\_\_\_