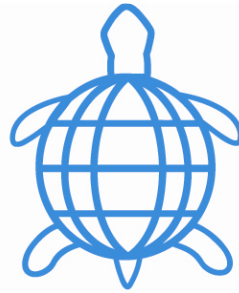


## Membership Type: Attraction

Every CITA member falls under a sector based on their business model.

**Who is included in the Attractions Sector?** Any business which attracts and entertains the public and does not fall under an existing category such as Allied, Restaurant/Nightclub, Watersports etc. For example market venues, amusement parks, museums.

### Membership Application Form Cayman Islands Tourism Association



**CAYMAN ISLANDS  
TOURISM ASSOCIATION**

***“Together for Tourism”***

## Company Details

## General Information

Company Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Company mailing address: PO Box: \_\_\_\_\_ KY1- \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Website address (for inclusion  
in our online directory): \_\_\_\_\_

Email: \_\_\_\_\_ # of Employees: \_\_\_\_\_

# of Caymanian/ Status Employees: \_\_\_\_\_ info kept strictly confidential

## Management

(Primary contact/Representative)

Company Manager, Owner, Operator: \_\_\_\_\_

Email: \_\_\_\_\_

Direct Line: \_\_\_\_\_ Cell #: \_\_\_\_\_

## Overview

Write a brief description of your company for CITA's website (20 words Max)

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## Business Directory

## Free Map Listing and other CITA Business Directory:

For those who have multiple locations/businesses please list the details as you would like them to be published for example on CITA's official map. The map is distributed to tourists and locals across the island. All CITA members receive a free listing.

Business	Location	Contact Number
1		
2		
3		

If you have more than three locations or businesses please email them to us.

## Membership Card Program

Membership Cards will be distributed with a list of benefits to all members

Yes, I would like to offer a discount to all CITA members and their employees

Discount Details: \_\_\_\_\_

Restrictions (if any): \_\_\_\_\_

No, I will not be offering a set discount to all CITA members and their employees

## Promotion Details

## Get Involved

### GET INVOLVED! Benefit from CITA Annual Events & Initiatives:

Please indicate areas of interest to in order to receive invitations to committee meetings to volunteer and get involved

- Airlift Committee and Conferences
- Annual Culinary Month Committee
- Annual Stingray Tourism Awards Committee
- Become a CITA Speaker or Trainer
- Cayman Islands Tourism Exchange
- Cruise Committee
- DEMA exhibition
- Dive 365
- Earth Day Clean Up - coordination
- Education & Training Committee
- Fundraising Committee
- Kittiwake Attraction Project
- Marketing Committee
- Taste of Cayman Food & Wine Festival Committee
- Tourism Apprenticeship Training Program
- Underwater Film Festival & Silent Auction Committee

## Need to Know

### Get additional key contacts involved :

Provide us with a list of key contacts in your company who need to know more information pertaining to a certain area as listed above.

Name	Email	Indicate Specific Interest or All

Check if you are sending a list of names and emails separately for inclusion in our distribution list for the weekly newsletter (excel format is appreciated).

## Suggestions

### What else would you like to see CITA involved in?

I want more training on \_\_\_\_\_

I want more focus on \_\_\_\_\_

I want more meetings about \_\_\_\_\_

Other: Please email us your suggestion or comments to [membership@cita.ky](mailto:membership@cita.ky)

## Payment Details

### Attraction Annual Fees:

\$400 CI per annum

All fees are in CI dollars.

( Please tick preferred method of payment )

Cheque  Please make all cheques payable to CITA

Credit Card:  Visa  Mastercard

Name on Card: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration Date: Month \_\_\_\_\_ Year \_\_\_\_\_

Please send us your most up to date logo in Vector Format or a High Quality JPEG to membership@cita.ky for future inclusion in CITA promotions.

New Membership Applications (not renewals) are required to submit:

Copy of Trade & Business License

Copy of any other licenses required for your business type to be in operation (ex. Liquor License, Hotel/Accommodations License)

Optional

Company biography and logo & or photo

Authorized Representative Only:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Title / Position: \_\_\_\_\_ Print Name: \_\_\_\_\_

### Membership Value:

You can look forward to the following and more from your membership

Membership Card

Inclusion in three International Promotions

Inclusion in CITA Staycation promotion

General Meetings

Marketing Meetings

Quarterly Luncheons

Newsletters on industry interest

Inclusion in CITA Official Map

Representation at Trade Conferences & Government Meetings/Liaison

**Thank you for your continued support.**

Questions? Please give us a call or visit our office on West Bay Road. Please send the completed application, photo copy of above documents and payment to:

**PO Box 31086 . Grand Cayman KY1-1205 . Phone: 345-949-8522 or Fax: 345-946-8522**

Thank You