The fields marked with \* are mandatory.

|  |  |
| --- | --- |
|  | |
| **Business Name: *(Membership Company Name)*** |  |
| **Accommodation establishment(s) that is represented under this membership\*  *(i.e. list all the names of Hotels, Camps, Lodges, Accommodations)***  ***\*Please ensure that the establishment is legally registered under the Holding Company*** | 1. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** 2. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** 3. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** 4. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** 5. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** 6. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** 7. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **\*Date of Incorporation:** |  |
| **Name of Holding Company *(if applicable)*:** |  |
| **\*Company TIN #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \*Company VRN #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | |
| **\*Postal Address:** |  |
| **\* Physical Address:** |  |
| **\* City:** |  |
| **\* Country:** |  |
| **\* Office Phone:** |  |
| **\*Mobile:** |  |
| **\* Email:** |  |
| **Website:** |  |
| **Fax:** |  |
| **\*Total (Accumulative) Number of rooms of ALL Establishments listed above:** | |
| **\*Public (Rack) Single Room Rate** | |
| **\*ANNUAL REVENUE for the past year (Accumulative of ALL Properties above):** | |
| **\*MEMBERSHIP CATEGORY:** | |

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| **SECTION 2 - CONTACT INFORMATION** | | |
| **Primary Contact** (To receive ALL HAT Communication) | | |
| **\*** Full Name: |  | |
| **\***Title: |  | |
| **\*** Phone: |  | |
| **\*** Email: |  | |
| PRESIDENT/CEO/MANAGING DIRECTOR | | |
| Full Name: |  | |
| Title: |  | |
| Phone: |  | |
| Email: |  | |
| **Senior HUMAN RESOURCE Contact** | | |
| **\*** Full Name: | |  |
| \*Title: | |  |
| **\*** Phone: | |  |
| **\*** Email: | |  |
| **\*** Should this individual be on our distribution list for member communications? **Yes No** | | |
| **Senior Marketing Contact** | | |
| **\*** Full Name: | |  |
| \*Title: | |  |
| **\*** Phone: | |  |
| **\*** Email: | |  |
| **\*** Should this individual be on our distribution list for member communications? **Yes No** | | |
| **Senior finance Contact** | | |
| **\*** Full Name: | |  |
| \*Title: | |  |
| **\*** Phone: | |  |
| **\*** Email: | |  |
| **\*** Should this individual be on our distribution list for member communications? **Yes No** | | |

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| ***2020 HAT MEMBERSHIP FEES*** | | | | | |
|  |  |  |  | |
| ***Category*** |  | **Yearly Payment** | | **Quarterly Payment** | |
| *1* | Business with annual turnover above USD 5 million AND more than 1 property | $ 5,000 | | $ 1,375.00 | |
| *1a* | Business with annual turnover above USD 5 million AND only 1 property | $ 3,500 | | $ 962.50 | |
| *2* | Business with annual turnover less than USD 5 million AND maximum 199 rooms | $ 2,500 | | $ 687.50 | |
| *3* | Business with annual turnover less than USD 3 million AND maximum 99 rooms | $ 1,500 | | $ 412.50 | |
| *4* | Business with annual turnover less than USD 1 million AND maximum 49 rooms | $ 750 | | $ 206.25 | |
| *5* | Business with annual turnover less than USD 500,000 AND maximum 24 rooms | $ 500 | | $ 137.50 | |
| *6* | Business with annual turnover less than USD 100,000 AND maximum 12 rooms | $ 250 | | $ 68.75 | |
| *6a* | New hotel with zero annual turnover | $ 250 | | $ 68.75 | |
|  | TATONA members special fee: $200 | $ 200.00 | | $ 55.00 | |

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| i) | Fees quoted exclude 18% VAT |  |  |
| ii) | 10% 'Early bird' discount for payments made before 31st January |  |  |
| iii) | Payment in quarterly installments possible at 10% premium |  |  |
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| **SECTION 4 – APPLICATION AUTHORIZATION** |
| I/We hereby apply for registration as a member of the Hotels Association of Tanzania:  Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Company Stamp/Seal:** |

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| **For Office use** | **Date** | **Signed** |
| **Received by CEO** |  |  |