Advice ▪ Support ▪ Network ▪ Influence

General Hotel Membership Application

PLEASE FILL IN DETAILS AND FAX THROUGH TO (03) 9654 1724

Hotel Trading Name: _____

Licensee: _____

Site Address: _____

Mailing / Billing Address: _____
(If different from site address)

Main Telephone: _____ **Facsimile:** _____

Email Address: _____

Website Address: _____

Nominee / Contacts *(Authorised for purchases and Workplace Relations matters) please email additional names and positions to aha@ahavic.com.au quoting your AHA (Vic) Account No.*

Name:	**Position:**
_____	_____
_____	_____
_____	_____
_____	_____

Hotel Facilities

Please tick where applicable:

Accommodation:	☐	Bistro:	☐	Number of seats: _____
No. of Accommodation Rooms:	_____	Fireplace:	☐	
		Smoking area:	☐	
Pub / TAB:	☐	Beer garden:	☐	
Gaming facilities:	☐	Function room:	☐	
Number of Machines:	_____	Children's play area:	☐	
Skychannel / TVN:	☐	Live entertainment:	☐	

I/We understand the need to comply with the Constitution and Rules of the Association and to accept the decisions of its governing Council.

Subject to the acceptance of this application, ... *(print name)* is hereby nominated as proxy for the Company under Rule7 (c) of the Constitution and Rules of the Association, who by his/her signature warrants that he/she is authorised hereto.

....
Signature of Member's duly authorised representative *(Proxy)* Date of signature

Members of the Victorian branch of the AHA also receive membership of the Australian Hotels and Hospitality Association Inc. Members will be bound by the relevant federal awards in our industry, which will govern the minimum wages and terms and conditions of their employee's employment. Membership data collected is not provided to outside organisations, except that divisional members will be provided with the contact details of other hotels in that division on request.)

**** Please note that the AHA (Vic) member is the venue not the licensee and as such the subscription is non refundable when there is a change of licensee. ****