GRAYS HARBOR COUNTY LODGING TAX ADVISORY COMMITTEE APPLICATION

NAME:			
MAILING ADDRESS:			
CITY	ZIP	EMAIL	
PHONE: HOME:	CELL	WORK	
EMPLOYER/OCCUPATION/TOURISM INDUSTRY AFFILIATION:			

ARE YOU A COLLECTOR OR USER OF THE HOTEL/MOTEL TAX?_____

*Note: A "**Collector**" is considered any individual who officially represents a lodging provider that collects the Hotel/Motel Tax in Grays Harbor County from its customers and pays such tax to the County as per State RCW 67.28.

A "User" is considered any individual who officially represents an organization which facilitates, organizes, and/or operates a tourism generating festival, event, activity or facility that qualifies for the use of HOTEL/MOTEL TAX funds as defined by State of Washington statutes.

Other qualifying criteria must also be met as per requirements/recommendations of the State Department of Revenue, State Auditor's Office, and the Grays Harbor County Lodging Tax Advisory Committee By-Laws.

PLEASE DESCRIBE HOW YOUR ARE INVOLVED IN THE TOURISM INDUSTRY IN GRAYS HARBOR COUNTY AND THE FUMBER OF YEARS OF SUCH INVOLVEMENT:

PLEASE TELL US WHY YOU WOULD LIKE TO BE CONSIDERED TO SERVE ON THE GRAYS HARBOR COUNTY LODGING TAX ADVISORY COMMITTEE:

PLEASE TELL US WHAT PERSONAL ATTRIBUTES YOU POSSESS THAT WILL BE ASSETS TO THE COMMITTEE:

PLEASE TELL US ANYTHING ELSE YOU WOULD LIKE US TO KNOW WHEN CONSIDERING YOU AS AN APPLICANT TO SERVE ON THE GRAYS AHRBOR COUNTY LODGING TAX ADVISORY COMMITTEE:

REFERENCES:

1)	PHONE:
2)	PHONE:
3)	PHONE:

APPLICANT SIGNATURE

DATE