



CRA Use Only

# 2018 RESTAURANT MEMBERSHIP APPLICATION

## RESTAURANT AND OWNER CONTACT INFORMATION

<b>Restaurant Name:</b>		Restaurant Phone:
Corp / LLC Name:	Website:	
Restaurant Physical Address:		
City:	State:	Zip Code:
<b>Owner/Partner Name*:</b>		<b>Use as Primary Contact?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Add me to the Legislative Committee so that I can participate in issues that will affect my business. (Attend via phone or in person.)		
Cell Phone:	Email:	
Mailing Address:		
City:	State:	Zip Code:

\*NOTE: Owner contact info will not be used (unless noted as Primary) EXCEPT FOR IMPORTANT NOTIFICATIONS that may affect your business.

## PRIMARY CONTACT (IF DIFFERENT FROM ABOVE)

Contact Name:	Title:
Phone:	Email:

## BILLING CONTACT | CHECK IF SAME

Contact Name:	Title:	
Phone:	Email:	
Mailing Address:		
City:	State:	Zip Code:

**YOUR CRA CONTACT: DEVANY MCNEILL | [dmcneill@corestaurant.org](mailto:dmcneill@corestaurant.org) | Cell Phone: 303-717-0939**

# RESTAURANT MEMBER INFORMATION

I AM A PROSTART GRADUATE!  YES  NO  
 I AM INTERESTED IN BECOMING A PROSTART MENTOR!  YES  NO

## COLORADO RESTAURANT ASSOCIATION MEMBERSHIP DUES

Select total annual gross food & beverage sales of the establishment OR of all operations under single ownership.  
 95.2% of dues may be deducted as a business (not charitable) expense.

Annual Gross Sales	Annual Dues	Monthly Dues	Annual Gross Sales	Annual Dues	Monthly Dues
<input type="checkbox"/> \$0 - \$500,000	\$525	\$43.75	<input type="checkbox"/> \$4,000,001 - \$7,000,000	\$2,000	\$166.67
<input type="checkbox"/> \$500,001 - \$750,000	\$710	\$59.17	<input type="checkbox"/> \$7,000,001 - \$10,000,000	\$2,715	\$226.25
<input type="checkbox"/> \$750,001 - \$1,000,000	\$935	\$77.92	<input type="checkbox"/> \$10,000,001 - \$20,000,000	\$3,625	\$302.08
<input type="checkbox"/> \$1,000,001 - \$2,000,000	\$1,235	\$102.92	<input type="checkbox"/> Over \$20,000,000	\$4,410	\$367.50
<input type="checkbox"/> \$2,000,001 - \$4,000,000	\$1,620	\$135.00			

PAY ANNUALLY OR  PAY MONTHLY

VIA CREDIT CARD:  American Express  Discover  MasterCard  Visa

Credit Card No.:

Exp. Date:

Billing Zip Code: 3 or 4 # Code: Name on Credit Card:

VIA ACH WITHDRAWAL: Attached OR scan and email a VOIDED check OR enter the following information:

Bank Name:

Bank Address:

Bank Routing No.:

Account No.:

**IMPORTANT: THIS IS AN ANNUAL AGREEMENT.** I understand that annual dues rates are subject to change upon renewal. I hereby authorize the CRA to initiate payments via ACH withdrawals or credit card charges from the above account. Authorization for ACH and credit card charges shall remain in effect until first annual dues have been paid and thereafter until written notice is received by the CRA, in accordance with all terms and conditions contained herein.

4.8% of dues, used for lobbying purposes, are not deductible for income tax purposes. Memberships are non-transferable and non-refundable. By becoming a member and paying your dues, you agree to the Bylaws and Constitution of the CRA. CRA membership does not guarantee participation in group benefits. This firm or individual certifies that the information provided is correct and agrees to all the statements on this application.

SIGNATURE:

DATE:

## PERSONALIZE YOUR MEMBERSHIP

I WOULD LIKE TO RECEIVE THE FOLLOWING EMAILS:

ALL  Weekly Newsletter  Restaurant News Briefs ("CRA Today")  NONE

I AM INTERESTED IN SERVING ON:

CRA CHAPTER Board of Directors  CRA STATE Board of Directors  
 Legislative Committee  Membership Committee  Programs & Events Committee

WHAT ARE YOUR PRIMARY CONCERNS?

ADA Issues  Service Dogs  Food Code  HR Issues  Healthcare  Liquor Law / Regulations  Marijuana  
 Minimum Wage  Overtime  Paid Sick Leave  Restrictive Scheduling  Service Charges  Small Business Issues  
 Taxes  Tip Pooling  Tourism  Wage & Hour  Other: \_\_\_\_\_