



# Georgia Motorcoach Operators Association

**Mailing Address:** 106 Main Street, Brookneal, VA 24528

866-376-7770

FAX 866-376-1156

## APPLICATION FOR ASSOCIATE MEMBERSHIP

Please complete information in type or print. Forward the application along with a check for \$200 or complete the credit card payment information below. Also send two letters of recommendation from current members of GMOA and signed Code of Ethics. Mail to the above address.

As a supplier and/or vender to the bus industry, we/I hereby apply for active Associate Membership in the Georgia Motorcoach Operators Association. By signature I certify that I have been engaged in a business which supplies products or services of interest to operator members of GMOA and that I do not own a motorcoach.

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

**Mailing Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **FAX:** \_\_\_\_\_ **800#:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Web:** \_\_\_\_\_

**Date Business was Started:** \_\_\_\_\_

**Category for Directory Listing:** (Check the category that best describes your business and write cross reference (CR) next to any other category that describes your business.)

Attraction     Hotel     Restaurant     Sales, Service, Products  
 Theatre     Tour Receptive     Tourism Agency

List representative(s) who are to be listed as company contact(s) in the Directory and will be active in the Georgia Motorcoach Operators Association.\*

<u>Name</u>	<u>Title</u>
_____	_____
_____	_____
_____	_____

List key representative and correct mailing address for the individual who should receive all GMOA correspondence:

**Key representative:** \_\_\_\_\_

**Mailing address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**Phone :** \_\_\_\_\_ **FAX:** \_\_\_\_\_ **800#:** \_\_\_\_\_

### Annual Membership Fee: \$200

Membership benefits include Associate Member's admittance to a "deluxe vendors' hospitality suite" and Market Place sessions during the GMOA Annual Meeting and one listing\* in the GMOA Membership Directory that is distributed to all members. Annual Meeting registration materials are sent to members only.

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

(Applicant Representative)

### Information for Payment by Credit Card

**Type:** Visa \_\_\_\_\_ **Master Card** \_\_\_\_\_ **American Express** \_\_\_\_\_ **Amount:** \$200

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

**Expiration:** \_\_\_\_\_ **Name On Card:** \_\_\_\_\_

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

(Applicant Representative)

Additional listings (for other locations, etc.) may be included in the directory at a cost of \$50 per listing.  
GMOA FEDERAL I.D. NUMBER: 26-0033159    63% of your membership dues may be used as a tax deduction



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## **Code of Ethics** **Associate Members**

This *code of ethics* for the Associate Members of the Georgia Motorcoach Operators Association has been adopted to promote and maintain the highest standards of personal conduct among its associate members.

We, the associate members of the Georgia Motorcoach Operators Association, in carrying out our roles of providing service to the traveling public recognize the need to do so in a professional manner and to deal with the public and our colleagues with the highest degree of integrity. Therefore, we herewith set forth the following creed which shall govern our endeavors to fulfill our obligations:

*To adhere to the professional standards of the Georgia Motorcoach Operators Association and to work to further its goals and objectives.*

*To conduct all business affairs with integrity, sincerity and accuracy in an open and forthright manner.*

*To act with integrity in financial dealings with the public and with entities utilized to help arrange or provide services and accommodations to motorcoach travelers.*

*To conduct our business and operations in such a manner as to protect the public and to promote the image of the industry.*

*To work to instill consumer and public confidence in the industry, avoiding any action conducive to discrediting it or membership in the Association.*

*To maintain quality in products and services offered to the motorcoach travelers.*

*To adhere and comply with all articles of the bylaws of the Georgia Motorcoach Operators Association.*

I have read and agree to adhere to this *Code of Ethics*.

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

Title: \_\_\_\_\_

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

This *Code of Ethics* must accompany the application for membership along with a check for the appropriate amount of membership dues and two letters of recommendation from current GMOA members.

# LETTER OF RECOMMENDATION

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

TO: Board of Directors, Georgia Motorcoach Operators Association

FROM: \_\_\_\_\_  
Current Member, GMOA

I recommend \_\_\_\_\_ for membership in  
Georgia Motorcoach Operators Association.

Signed: \_\_\_\_\_  
(Current Member)

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

Telephone: \_\_\_\_\_

# LETTER OF RECOMMENDATION

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

TO: Board of Directors, Georgia Motorcoach Operators Association

FROM: \_\_\_\_\_  
Current Member, GMOA

I recommend \_\_\_\_\_ for membership in  
Georgia Motorcoach Operators Association.

Signed: \_\_\_\_\_  
(Current Member)

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

Telephone: \_\_\_\_\_