

MEMBERSHIP CLASS CHANGE APPLICATION

CHECK THE CLASS OF MEMBERSHIP YOU ARE REQUESTING: General Member:

A General Member shall possess and/or be in control by either direct ownership (title), lease or right-to use, resort inventory for the purpose of exchange, direct trade, rental, or wholesale. The General Member shall have voting rights in the affairs of C.A.R.E. as set forth in the by-laws of C.A.R.E.

Associate Member:

An Associate Member does not possess nor control use of resort inventory but is seeking membership in C.A.R.E. as a means of business enhancement. The Associate Member does not have voting rights in the affairs of C.A.R.E.

CLASS CHANGE FEE: \$100.00

THIS APPLICATION MUST BE SIGNED BY THE INDIVIDUAL DESIGNATED AS THE MEMBER RESPONSIBLE PARTY ASSOCIATED WITH THIS APPLICATION. APPLICABLE FEES MUST BE RECEIVED AT TIME OF APPLICATION.

I/We hereby make application for a C.A.R.E. Membership Class Change in the Cooperative Association of Resort Exchangers, Inc. I/We understand that this application is subject to the approval of the Board of Directors. I/We understand that notice regarding our application will be provided within 30 days of the date of this application upon receipt of complete information. I/We understand the names and business information stated herein will appear in the C.A.R.E. Online Directory. I, the undersigned designated Member Responsible Party, certify that I have the right to make application into C.A.R.E. on behalf of the resorts and/or businesses stated.

BY SIGNING THIS APPLICATION AS THE MEMBER RESPONSIBLE PARTY, I REPRESENT THAT I HAVE READ AND HAVE FULL UNDERSTANDING AND AGREEMENT TO ABIDE BY THE C.A.R.E. BY-LAWS AND THE CODE OF STANDARDS AND ETHICS. The complete C.A.R.E. Code of Standards and Ethics can be found online at www.care-online.org under "Membership Information".

TO VIEW CODE CLICK HERE

Printed Name

PAYMENT PROCESSING:
Payment must be received at time of application, but is not processed until membership is approved.

Check:
Wire Transfer: E-mail info@care-online.org

for wire instructions

Card Number:

Exp. Date:

Billing Address:

X

Name as it appears on credit card

X

Signature

Credit Card: AMEX__ Visa_ _MasterCard

APPLICANT INFORMATION:

(Complete information on both pages of this application)

Company Name (as listed in the official records of C.A.R.E.)					
Mailing Address					
City	State/Province		Postal Code	2	Country
Tele	ephone	Fax	W	eb Address	
Res	ponsible Party Name		Title		
E-N	Iail Address				
Authorized Member Representative Name (General Members only) Title					
E-Mail Address					
BUSINESS INFORMATION: Business is: Corporation ProprietorshipLLC					
Oth	er (please explain): rt date of Business:		- /C		
Inco	orporated:	Stat	e/Country in	which Busin	iess was
Bus	iness Principals: Owner:		CEO:		
	President:		coo:_		
Tax	ID or FEI#				
What is the nature of the business of this company? (check all that apply):					
Resort Developer Exchange Company (Cruise and/or Resort)					
Membership Travel Club Resale Company Rental Company Wholesaler of Inventory					
Resort DeveloperExchange Company (Cruise and/or Resort) Membership Travel ClubResale Company Rental CompanyWholesaler of Inventory Property ManagementTravel AgencyPOA or HOA Certificates/IncentivesService Provider (If yes, what service (s)					
Certificates/Incentives Service Provider (If yes, what service (s)					
does your company provide?:					
PROVIDE A BRIEF DESCRIPTION OF THE COMPANY BUSINESS (25 words or less):					
PRIMARY CONTACTS: 1)					
-,	Name		Title		
	Phone		E-mail		
2)	Name		Title		
۵۱	Phone		E-mail		
3)	Name		Title		
	Phone		E-mail		
	ADDITIONAL INFO	RMATION R		PAGE TWO	·

SEND APPLICATION AND PAYMENT TO:

C.A.R.E.
P.O. Box 2803
Harrisonburg, VA 22801
Fax: 713-814-8527
E-Mail: info@care-online.org

ADDITIONAL BUSINESS INFORMATION: If receiving inventory from other C.A.R.E. members, how will the inventory be utilized? (check all that apply): Owner/Member Rentals Owner/Member Exchanges Travel Agency Rentals Public Rentals Three Way Exchanges (received from another company and sold or exchanged to you or another company) Wholesalé Other (Please Explain) Not Applicable-Will not receive inventory from C.A.R.E. Member Companies Each and every C.A.R.E. General and Associate Member agrees to issue written confirmations and to be financially responsible for providing comparable accommodations should such confirmed and reserved accommodations be rendered impossible to honor. Do you own, lease and/or control lodging inventory? IF YES, PLEASE COMPLETE FOLLOWING REQUIRED INFORMATION: GENERAL MEMBER COMPANY INFORMATION: (Complete only if applying for C.A.R.E. General Membership) Lodging inventory comes from the following sources: Owner/Member Deposits: Rental Listings: Leased Inventory: Unsold Developer Inventory: Purchased/Owned Inventory: Other: The lodging inventory controlled by the applying company will be offered to other C.A.R.E. members for: Wholesale: _____ Exchange: _____ Both Wholesale and Exchange: ____ List the inventory you own or control. SPECIFIC RESORT NAMES AND AREAS MUST BE NOTED for reference on C.A.R.E.'S Online Directory. **Resort Name** Resort Name Area Area **Resort Name** Area Resort Name Area **Resort Name** Area Resort Name Area Resort Name Area Resort Name Area **Resort Name** Resort Name Area Area

Resort Name

Area

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