**Orange County Tavern and Restaurant Association (OCTRA/ESRTA)**

**Membership Application**

**PO Box 53**

**Vails Gate, NY 12584**

**octramember@gmail.com**

Your annual dues include membership in OCTRA and ESRTA

(Empire State Restaurant and Tavern Association)

Member Information:

Name Of Establishment \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Owners Name(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Physical Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Owner Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business Web Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Are you on FB? \_\_\_\_\_\_\_\_\_\_

Establishment Information:

Are you able to host a General Membership meeting of 30-50 attendees? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have a semi-private room, for a Board Meeting of up to 15 attendees? \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have banquet facilities? \_\_\_\_\_\_\_\_\_\_\_\_ If so, for how many? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have outdoor facilities for large parties? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please describe your operations (bar, full service restaurant, bowling alley w/bar, regularly scheduled events such as live music, karaoke)

Do you have games/amusements (quickdraw, jukebox, darts, horseshoes, etc)?

**Annual Membership is $200**

Payment can be made via check payable to ESRTA or Empire State Restaurant and Tavern Association, or cash when paying in person only. Please attach payment to application.

**Thank you for becoming a part of our Association! We look forward to working with you!**

*Proudly representing the Hospitality Industry since 1956…… members support members!*

**FOR OFFICE USE ONLY:**

Date Paid: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Check Number (or Cash): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Referring Member (if applicable):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_