

# California Attractions and Parks Association Membership Application

Please send form and payment to:

John Robinson  
CAPA  
1201 K Street  
Suite 800  
Sacramento, CA 95814

## 1. PLEASE COMPLETE YOUR PERSONAL INFORMATION

Company \_\_\_\_\_

Address (Year Round) \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Contact Name: \_\_\_\_\_

Professional Title/Position \_\_\_\_\_

Telephone/Fax \_\_\_\_\_

E-mail/Web site \_\_\_\_\_

## 2. PLEASE SELECT THE APPROPRIATE MEMBERSHIP CATEGORY AND DUES LEVEL

### MEMBER

Any firm or corporation engaged in the amusement or recreation business providing family amusement, recreation or entertainment at a permanently established location in the State of California.

Please indicate type of facility:

Amusement Park

Theme Park

Water Park

Family Entertainment Center

In what year did your facility first open for operation? \_\_\_\_\_

Annual Membership Dues for amusement facilities are determined by public attendance using the schedule below (check one):

CATEGORY	ANNUAL PUBLIC ATTENDANCE	DUES
I	Equal to or in excess of 3,000,000	\$31,762
II	Equal to or in excess of 1,500,000	\$12,705
III	Equal to or in excess of 750,000, but less than 1,500,000	\$9,817
IV	Equal to or in excess of 250,000, but less than 750,000	\$6,500
V	Less than 250,000	\$1,210

### ASSOCIATE MEMBERSHIP

- *Out of State Facility* – Any firm or corporation engaged in the amusement or recreation business providing family amusement, recreation or entertainment at a permanent established location out side the State of California
- *Related Industry* - Any firm, entity or individual engaged in the broader family entertainment or recreation industry, not defined by California Permanent Ride Regulations, such as zoos, aquariums, museums, historical sites or other attractions.
- *Vendor/Supplier* - Any entity or individual engaged in manufacturing, designing or selling equipment, services or supplies to the amusement ride industry, or who provides legal services to owners or operators of permanent amusement rides.
- *Individual* – A former employee of an amusement facility or an individual engaged in the development of an amusement facility. Individual memberships are NOT transferable to any other individual, and only the individual who is registered has access to CAPA benefits.

First year of operation \_\_\_\_\_ Product or service you provide to the industry \_\_\_\_\_

Associate Member Designation (please check one)	DUES
Out of state facility	\$1,000
Related Industry	\$1,000
Vendor/Supplier	\$ 650
Individual	\$ 500

## 3. METHOD OF PAYMENT

Date \_\_\_\_\_ Amount paid \_\_\_\_\_

Please make check payable to CAPA.