



# CITY OF KIRKLAND

## APPLICATION: *Tourism Development Committee*

*Please print or type:*

Organization Name: \_\_\_\_\_

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

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name and title of representative proposed for membership:

\_\_\_\_\_

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

Category (circle one – see below):      **A.**      **B.**      **C.**

- A. This organization represents businesses required to collect lodging tax.
- B. This organization is involved in activities authorized to be funded by lodging tax revenue.
- C. This local agency is involved in tourism promotion.

Please describe the nature of the organization's business relationship to the designated category:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please provide the relevant background/skills of the proposed representative: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature of Representative

Return form to Kathi Anderson, City Clerk, City of Kirkland, 123 Fifth Avenue, Kirkland, WA 98033

Email: [kanderson@kirklandwa.gov](mailto:kanderson@kirklandwa.gov) Fax: 425-587-3198

This position is open until filled.