

Due no later than August 5, 2011, for inclusion in  
The 2012 ABA Motorcoach Marketer  
Visit [www.buses.org](http://www.buses.org) to update your profile online

## ABA TRAVEL MEMBER PROFILE FORM

Selected data from this form will be published in the Marketplace Appointment Scheduling information and the Marketplace Seller Profile forms, the Marketplace on-site database, The 2012 ABA Motorcoach Marketer, and on ABA's Web site.

### SECTION A: MEMBERSHIP INFORMATION\* (starred items are required)

Clearly print your membership information below:  
(U.S. members - include zip + 4)

(Changes made here will also be reflected in The ABA Motorcoach Marketer)

\* Member Number: \_\_\_\_\_  
Contact Name: \_\_\_\_\_  
Contact Title: \_\_\_\_\_  
\* Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_  
Toll free: \_\_\_\_\_  
Fax: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Web site: \_\_\_\_\_

### SECTION B: DIRECTORY INFORMATION-Published in The ABA Motorcoach Marketer & online

Changes made in this section will only be reflected in The ABA Motorcoach Marketer and online. If you wish to change your membership information with ABA, do so in Section A above.

#### 1) The ABA Motorcoach Marketer Category

One of the many benefits of your membership is one FREE listing in The ABA Motorcoach Marketer. You have the option (based on your member type) to change the category for your one FREE listing for the upcoming edition: refer to the reference sheet of category types for a full list.

If you would like your free listing under a different category, please enter the category here: \_\_\_\_\_

#### 2) Listing Location

Your one FREE listing in The ABA Motorcoach Marketer will appear under the city listed in Section A. If you wish your listing to appear under another location, such as the nearest major metro area, please indicate city, state/province, and country.

\_\_\_\_\_

#### 3) Contact Option

Instead of the membership contact listed in Section A, I would like a different contact person printed in my one FREE Motorcoach Marketer listing and online. (IF YOU DO NOT WANT ALTERNATE CONTACT INFORMATION IN THE ABA MOTORCOACH MARKETER, SKIP TO NUMBER 4)

Contact/Title: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
Toll Free: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

#### 4) Additional & Enhanced Logo Listings

Broaden your reach by making sure motorcoach and tour operators find you in every location and under every business service that you provide with one or more Additional Listings. Also, make your organization stand out with an Enhanced Logo Listing. Add your company logo to your main and additional listings to make an impact. See the Additional & Enhanced Listing Form for more information.

**SECTION C: MARKETING INFORMATION\* (starred items are required)**

Published in American Bus Marketplace materials and other ABA products.

**\*1) Check areas in which you are located:**

- (AK) Alaska
- (AL) Alabama
- (AR) Arkansas
- (AZ) Arizona
- (CA) California
- (CO) Colorado
- (CT) Connecticut
- (DC) Washington, DC
- (DE) Delaware
- (FL) Florida
- (GA) Georgia
- (HI) Hawaii
- (IA) Iowa
- (ID) Idaho
- (IL) Illinois
- (IN) Indiana
- (KS) Kansas

- (KY) Kentucky
- (LA) Louisiana
- (MA) Massachusetts
- (MD) Maryland
- (ME) Maine
- (MI) Michigan
- (MN) Minnesota
- (MO) Missouri
- (MS) Mississippi
- (MT) Montana
- (NC) North Carolina
- (ND) North Dakota
- (NE) Nebraska
- (NH) New Hampshire
- (NJ) New Jersey
- (NM) New Mexico
- (NV) Nevada
- (NY) New York

- (OH) Ohio
- (OK) Oklahoma
- (OR) Oregon
- (PA) Pennsylvania
- (RI) Rhode Island
- (SC) South Carolina
- (SD) South Dakota
- (TN) Tennessee
- (TX) Texas
- (UT) Utah
- (VA) Virginia
- (VT) Vermont
- (WA) Washington
- (WI) Wisconsin
- (WV) West Virginia
- (WY) Wyoming

**PROVINCES:**

- (AB) Alberta
- (BC) British Columbia
- (MB) Manitoba
- (NB) New Brunswick
- (NF) Newfoundland
- (NS) Nova Scotia
- (NT) Northwest Territories
- (NU) Nunavut
- (ON) Ontario
- (PE) Prince Edward Island
- (PQ) Quebec
- (SK) Saskatchewan
- (YT) Yukon Territories

**MEXICO:**

- (MX) Mexico

**2) Please indicate the marketing services offered to operators: (Check all that apply)**

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Bus Parking                              | <input type="checkbox"/> Consumer Brochures                 | <input type="checkbox"/> Group Rates/Discounts |
| <input type="checkbox"/> CDs/DVDs                                 | <input type="checkbox"/> Cooperative Advertising/Partnering | <input type="checkbox"/> Photographs           |
| <input type="checkbox"/> Complimentary Policy for Drivers/Escorts | <input type="checkbox"/> Familiarization Tours              | <input type="checkbox"/> Tier Pricing          |
|   | <input type="checkbox"/> Graphics/Clip Art                  | <input type="checkbox"/> Tour Planning         |

**\*3) Organization description**

Briefly describe the services you provide. Limit your description to 35 words or less. Please type or print clearly using proper grammar and punctuation. (This information does not appear in The ABA Motorcoach Marketer but will be utilized for Marketplace and online profiles.)

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**SECTION D: STATISTICAL INFORMATION**

ABA uses this data to compile information on overall industry economic impact for federal legislative and regulatory purposes.

**1) Employees:**

No. of full-time employees \_\_\_\_\_ No. of part-time employees \_\_\_\_\_

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**2) Optional:**

To improve ABA's understanding of industry demographics, please mark the ONE box that best describes the ethnic origin of the ABA member contact for this organization:

- |   |  |
|---|--|
| <input type="checkbox"/> African American/Black   | <input type="checkbox"/> Native American/Alaskan Native/Aboriginal |
| <input type="checkbox"/> Asian                    | <input type="checkbox"/> Native Hawaiian/Pacific Islander          |
| <input type="checkbox"/> Caucasian (non-Hispanic) | <input type="checkbox"/> Multi-Racial (please specify) _____       |
| <input type="checkbox"/> Hispanic/Latino          |  |

**Form submitted by:**

Print Name Clearly \_\_\_\_\_ Date \_\_\_\_\_ Signature \_\_\_\_\_

Please fax form by August 5, 2011, to 202-218-7253 or mail to:

ABA Profile Form  
111 K Street NE, 9<sup>th</sup> Floor  
Washington, DC 20002

<b>FOR ABA USE ONLY</b>
Date Rec'd: _____
Entered by: _____
Date Entered: _____