

## MEMBERSHIP APPLICATION

All information provided on this form will be kept confidential

FIRST NAME

LAST NAME

TITLE

COMPANY NAME

MANAGERS NAME

DO THEY RESIDE IN PEC Yes No

TYPE OF BUSINESS Hotel Motel Inn B&B STA Campground Other

# OF GUEST ROOMS OR UNITS

OPERATIONAL PERIOD Year- Round Seasonal-Please specify number of months

ADDRESS

TELEPHONE

E-MAIL

MEMBER CATEGORY Accommodation Associate

TELL US ABOUT YOUR BUSINESS

**Submit**

**PRINCE EDWARD COUNTY ACCOMMODATION ASSOCIATION**

33 BRIDGE STREET, PICTON, ONTARIO K0K 2T0

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