

ABBA
ALBERTA BED & BREAKFAST ASSOCIATION
New Membership Application Form
(Membership, Website and Directory)

Today's Date _____ **Membership January to December for Year** _____

Please type or print the information exactly as you want it to appear in the directory and webpage. It is very important to give a **correct and complete mailing address**. **Please do not use all capital letters.**

1. Are you aware that an ABBA inspection is required before this application is complete? _____
2. Establishment Full Name _____
3. Name of Owner/Operator(s) _____
4. _____
House/Property No. Street/Ave./Range Rd/TWP Road PO Box No. City/Town Postal Code
5. _____
Phone Toll Free Cell Fax
6. _____ http://www. _____
Email Address Web page
7. Town/City for your primary listing (within a suggested 35km radius of your house) _____
8. One additional town/city where you want to be listed for an additional fee, TBA each year.

PLEASE NOTE:

1. Forward this form, and your completed inspection report, and applicable certificates, and your payment, to the Membership Coordinator.
2. Once the above has been completed, ABBA's web master for bbalberta.com will email you when your basic listing is created.
3. It then becomes your 100% responsibility to maintain your website listing and its accuracy of information. This includes checking the accuracy of the above information, as well as your creation of the print directory description, and the web description.

I confirm that the information given on this form is correct:

Signature

Dated: _____

Please Print Your Name