



APPLICATION FORM				
PROPERTY NAME			LEGAL NAME – if different from property name	
DESCRIPTION (maximum 800 characters)				
PROPERTY INFORMATION				
STREET			PROV	
CITY			POSTAL CODE	
PHONE		FAX		TOLL FREE
EMAIL				
WEBSITE				
NUMBER OF ROOMS				
GPS (Decimal format required)				
LATITUDE (N)		LONGITUDE (W)		
BILLING INFORMATION – <input type="checkbox"/> please check if same as property address				
STREET			PROV	
CITY			POSTAL CODE	
CONTACT INFORMATION				
NAME			PHONE	
POSITION		EMAIL		
PARTICIPATION FEES				
<input type="checkbox"/> PARTICIPATION FEE \$195 + \$1 PER "BOOK NOW" CLICK				
PAYMENT (GST # 10669 3583 RT Plus applicable taxes)				
<input type="checkbox"/> CHEQUE	<input type="checkbox"/> VISA	<input type="checkbox"/> MASTERCARD	<input type="checkbox"/> REQUEST INVOICE	
_____	_____	_____	_____	
Card Number	Expiry Date	Security Code		
_____	_____	_____		
Cardholder Name (please print)	Signature	Date		
INVOICE / RECEIPT TO	<input type="checkbox"/> PROPERTY	<input type="checkbox"/> LEGAL ENTITY	<input type="checkbox"/> OTHER _____	
APPROVAL I certify that I am acting on behalf of the property and that I am authorized to enter into this agreement				
_____	_____	_____		
Name (please print)	Signature	Date		

PLEASE NOTE CHECK IN CANADA IS NOT RESPONSIBLE FOR ANY ERRORS OR OMISSIONS

Return this form with your payment to Check In Canada

2707 Ellwood Drive, Edmonton, AB T6X 0P7

info@checkincanada.com

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