

Saugeen Country Tourism Association Membership Application

Business Name: _____

Contact Name: _____ Title: _____

Address: _____

Town: _____ Province: Ontario Postal Code: _____

Phone: () _____ - _____ Toll Free Number (if available): () _____ - _____

Cell: () _____ - _____ Email: _____

Fax: () _____ - _____

Would you like your email address in our Online Business Directory?
(If NO it will be used for administrative purposes only) YES ___ NO ___

Website: _____

Type Of Business: _____ Open Year round ___ Seasonal ___

Hours Of Operation: _____

Up to 25 Word Description Of you Business, Including Specialties:
(Information that will help increase our knowledge to refer your business to potential customers)

Membership Fee: Total \$52.50 (\$50 + 5% GST)

Method of Payment: Cash ___ Check ___ (checks made payable to Saugeen Country Tourism Association)

Applicants Signature: _____ Date: _____ 2009



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