



HOTEL ASSOCIATION OF CANADA  
ASSOCIATION DES HÔTELS DU CANADA

## Educational Membership Application Form

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### Contact Information

Educational Institution: \_\_\_\_\_

School/Program Name: \_\_\_\_\_

Program Website: http:// \_\_\_\_\_

#### Contact #1

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Full Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone: (    ) \_\_\_\_\_

Fax: (    ) \_\_\_\_\_

Email: \_\_\_\_\_

#### Contact #2

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Full Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone: (    ) \_\_\_\_\_

Fax: (    ) \_\_\_\_\_

Email: \_\_\_\_\_

**Notes:** The HAC distributes statistical information via email (PKF Trends, HVS Lodging Outlook, Cross Border Statistics). If you prefer **NOT** to receive these emails, please check the circle next to your email address.

Both contacts will be added to HAC's main database to receive mailings, emails, etc. but only Contact #1 will be posted with the member listing on the website.

### Program Information

Please include a typed description (100 words max.) about your program. This description and contact information is used by HAC for membership records and for posting on the HAC web site.

### Payment Information

A one (1) year Educator Membership is **\$300.00** CDN (plus GST).

**Membership Dues:**       \$300.00  

5% GST (R133807263):   \$ 15.00  

Amount Enclosed:      \$315.00  

#### Method of Payment

Cheque (payable to *Hotel Association of Canada*)

VISA     AMEX     MasterCard

Signature: \_\_\_\_\_ Card Number: \_\_\_\_\_

Name (print): \_\_\_\_\_ Card Exp. Date: \_\_\_\_\_ Current Date: \_\_\_\_\_

*Payment of fees reflects understanding of the Federal Privacy Act and that information gathered by the HAC is for the purpose of maintaining contact with you and to send information related to HAC products, activities and services; and to properly categorize your membership for billing and information dissemination purposes.*