



Accommodation Partner Listing – Application Form

1. Business & Contact Information

Legal Business Name: _____

Operating/Brand Name (if different): _____

Primary Contact Person: _____

Position/Title: _____

Phone: _____

Email: _____

Website: _____

Online Booking URL: _____

Business Address: _____

Accommodation Type: _____

5. Listing Content

Public Listing Title: _____

Short Description (80–150 words):

6. Licensing & Compliance

- We comply with local accommodation/licensing requirements
- We maintain appropriate commercial/rental insurance
- Property has smoke/CO alarms where required



7. Declarations & Consent

- Information provided is accurate
- Kelowna Nordic may edit/decline/remove our listing
- Permission granted to publish submitted content
- Consent to be contacted regarding listing

Name of Authorized Representative: _____

Position/Title: _____

Signature: _____

Date: _____