

Application for AA Recognition **Hotels**

Publicly available information - this information may be made available worldwide

1. Establishment details

Manager's Tenant's name:

(if different from the owner's details below)

Establishment name:

Address:

Postcode:

Tel no (inc area code):

Email address:

Website address:

2. Establishment operation detailsIs the establishment open all year round? YES NO

If not, dates when closed: _____ to _____

Total number of bedrooms: _____

Information restricted for AA use

3. Ownership details

Name of the owner (the "Applicant"):

Address of the owner (if different from site address):

Postcode:

4. Accommodation prices

Prices must include VAT and service charges where applicable

Single room: Min: _____ Max: _____

Double room (2pp): Min: _____ Max: _____

Are the prices quoted above for the room only? YES NO If NO, do prices include breakfast? YES NO Do prices include dinner? YES NO Do you accept credit cards? YES NO **5. Conference facilities**

Maximum number of delegates in Theatre layout: _____

Maximum number of delegates in Classroom layout: _____

Maximum number of delegates in Boardroom layout: _____

What is the 24-hr delegate rate?: Min: _____ Max: _____

(including bedroom, dinner, breakfast, lunch, tea/coffee)

6. Scheduling initial inspections

Please state any times when an inspection would be inconvenient. This will impact on the timing of your initial inspection, eg. current or planned renovation/refurbishment programmes:

7. Rating with other organisations

If applicable, please specify the organisation and current rating you hold:

8. Anticipated star rating1 2 3 4 5 **9. Data Protection Act** (also see Terms and Conditions)

By providing the requested data you consent to it being held and processed in accordance with clause 26 of the terms and conditions set overleaf.

10. Declaration

I confirm I have read the Quality Standards.

I apply for the establishment named to be considered for recognition by the AA. I confirm the information provided is correct and that I accept the terms and conditions set out overleaf. The applicant agrees to waive/refund the bed and breakfast rate on 'check out'.

I wish to apply for: Hotel

SIGNED: _____ NAME: _____

POSITION: _____ DATE: _____

5 Star Hotel Ratification process

New applications for AA 5 Star Hotel Recognition are accepted on the understanding that a minimum of 2 overnight visits will need to be completed prior to confirmation of this rating and the applicant agrees to refund on 'check out' the AA Inspector's 2nd overnight visit expenses.

11. Recognition fee

I enclose the non-refundable registration fee, which includes VAT:

£ _____

Method of payment - please complete section A, B or C and tick the appropriate boxes**A. Cheque payment**

Please make cheques payable to AA Media Ltd and send together with this form to:

AA Hotel Services, Grove House, Lutyens Close, Chineham Court, Basingstoke, RG24 8AG

B. Card payment

You will receive an invoice. Please telephone credit control on 01733 207324

C. Direct Debit

Please complete enclosed Direct Debit mandate and return. Schedule to follow.