

# Membership Application Form

Please return this form with your payment to:

The Membership Office, Tourism South East, 40 Chamberlayne Road, Eastleigh, SO50 5JH

Business Name	<input type="text"/>		
Business Address	<input type="text"/>		Invoice/Correspondence Address
	<input type="text"/>		<input type="text"/>
	<input type="text"/>		<input type="text"/>
	<input type="text"/>		<input type="text"/>
	<input type="text"/>		<input type="text"/>
	<input type="text"/>		<input type="text"/>
Title	<input type="text" value="Mr/Mrs/Miss/Ms"/>	.	
Name	<input type="text"/>	Tel No.	<input type="text"/>
Fee enclosed	£ <input type="text"/> (including VAT)	Fax No.	<input type="text"/>
Email Address	<input type="text"/>	Website	<input type="text"/>

## Category Applied for: (please tick and complete details as appropriate)

<b>Serviced Accommodation *</b>			
Bed & Breakfast	<input type="checkbox"/>	Number of Rooms	<input type="text"/>
Guest House	<input type="checkbox"/>	Number of Rooms	<input type="text"/>
Hotel	<input type="checkbox"/>	Number of Rooms	<input type="text"/>
<b>Self Catering Accommodation *</b>			
	<input type="checkbox"/>	Number of units	<input type="text"/>
<b>Holiday Parks *</b>			
	<input type="checkbox"/>	Number of units/pitches	<input type="text"/>
<b>Educational/Activity Centres without accommodation</b>			
	<input type="checkbox"/>		
<b>Language Schools/Study Centres with accommodation *</b>			
	<input type="checkbox"/>	Number of rooms or pitches	<input type="text"/>
<b>Visitor Attractions</b>			
	<input type="checkbox"/>	No of visitors/annum	<input type="text"/>
<b>Pub/Café/Restaurant</b>			
	<input type="checkbox"/>	No of covers	<input type="text"/>
<b>Transport Companies/Carriers incl. Cycle Hire</b>			
	<input type="checkbox"/>	No of passenger capacity	<input type="text"/>
<b>Professional Businesses incl. Travel agents e.t.c</b>			
	<input type="checkbox"/>		
<b>Individual / Other</b>			
	<input type="checkbox"/>	Please Specify:	<input type="text"/>
<b>Groups –</b>			
	<input type="checkbox"/>	Units:	<input type="text"/>
If you are joining as a group, please ensure we have the details of all the individual units to be included in the group			

**\* Please note that all accommodation providers must be assessed by one of the assessing companies.**

My awarded rating is

with Quality In Tourism or the AA\*

\* Please delete as applicable

### OFFICE USE ONLY

Resource

DCC

Mbr No

## Data Protection Act 1998

I/We acknowledge that Tourism South East (TSE) will process by computer or otherwise information about me/us as a result of the application whether or not it proceeds. By signing this membership form I/we consent to TSE using the personal data to;

- enable TSE to manage my/our dealings with TSE; and
- bring to my/our attention information on any of the products and services of TSE. I/We understand that TSE may contact me/us by post, telephone, e-mail and any other appropriate means of communication.

I/We agree that my/our personal information held by TSE may be used by TSE and can be made available to carefully selected organisations who may contact me/us by mail, telephone, fax, e-mail or via host mailings from TSE.

If you do not want your details passed on to other organisations please tick this box.

I/We understand that I/we have the right to ask for a copy of the personal data about me/us held by TSE in return for a payment and require TSE to correct any inaccuracies in the personal data. The Data Controller is TSE and its representative can be contacted at the Board's offices.

## Payment Instructions

PLEASE TICK ONE of the three boxes below to indicate your chosen payment method

Cheque  Please make cheques payable to Tourism South East

Credit/Debit Card  Card No  Valid From  /

**We do not accept American Express** Card Type  Expiry Date  /

Switch Issue No.  Cardholders Name

3 Digit Security Code

Direct Debit  Please complete the form below

Signed

Date

**TOURISM  
SOUTH EAST**

40 Chamberlayne Road, Eastleigh, Hants, SO50 5JH  
Old Brew House, Warwick Park, Tunbridge Wells, TN2 5TA

**Instruction to your Bank or  
Building Society to pay by Direct  
Debit**



Full name and postal address of your Bank or Building Society

To the Manager	Bank/Building Society
Address	
<input type="text"/>	
<input type="text"/>	
<input type="text"/>	
Postcode	

Originator's Identification Number

9  3  0  7  3  5

0  0     Reference Number

### Instruction to your Bank or Building Society

Please pay Tourism South East Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the by the Direct Debit Guarantee. I understand that this Instruction may remain with Tourism South East and, if so, details will be passed electronically to my Bank/Building Society.

Name of Account

Branch Sort Code

Bank / Building Society Account Number

Signature(s)

Date

Banks and Building Societies may not accept direct debit instructions for some types of accounts