

RV Route Information: ATTRACTIONS

Use this form to update your business's information with your RTO if you wish to be included on the RV route in your area. Use the scorecard on the back to assess your business's market readiness. All fields must be completed unless noted.

ATTRACTION INFORMATION											
NAME The name of the attraction as it should appear to the public											
DESCRIPTION Highligh	nt what is unique abo	out your attra	ction and h	ow it serves t	he RV ma.	rket (25 wo	ords max)				
								_			
CATEGORY Select one	LOCAL FLAVOUR MUSEUMS, HALLS OF							ΣI			
film, theatre, & music	CULTURAL EXPERIENCES	S CURIOSI	TIES & ECCENTI	RICITIES HI	STORICAL, ST	ATUES, MON	uments, & memorial	.S			
ADDRESS Use mailing of	address if no street a	ddress PROVINCE		p,	OSTAL CODE						
TELEPHONE NUMBER	() -		TOLL FREE								
E-MAIL											
TOURIST INFORMA	ATION										
SEASON START DATE _			SEASO	N END DATE	l						
HOURS OF OPERATION								_			
AVERAGE ADMISSION	COST FOR ONE ADU	ULT (\$)									
PAYMENT TYPES Selec	t all that apply	CASH	DEBIT	MASTERCAR	D A	MEX	VISA				

Canadä





Public washrooms? RV-specific parking? Discount for RVers? Accessible for persons with disabilities? Free of low overhangs? (height clearance, avoiding low-hanging trees, etc.) Pull-through parking? (so RVers don't have to back up) Picnic area? Appropriate for families?

SCORING

7-9 Include on recommended itinerary for the RV route. Businesses scoring at this level should be ambassadors for the RV route, and should be consulted each year on the route's development and maintenance.

TOTAL

- 4-6 Ideal alternate, or recommended, depending on the total number of highly ranked businesses on the route.
- Not on the recommended route. Further development of attraction should be undertaken if this establishment wishes to attract the RV market.

NOTES			

Please return the completed form to your local or regional route coordinator:

Known as RV friendly within the RV community?