



Tourism, Culture & Heritage

For Office Use Only	
Date Application Received	

Reviewed By	

Date Reviewed	Code
_____	_____

Application for 2007: Open Door Program

Application for participation in the Open Door Program:

Name of Establishment: _____

Address of Establishment:

Street Address _____ PO Box _____

City/Town _____ Postal Code _____

Telephone: () _____ Fax: () _____

E-mail: _____ Website: _____

Name of Manager/Supervisor: _____

Contact Person for Program: _____

Dates of Operation: Year round Seasonal Dates: _____

Discount, special service or promotion to be offered to all eligible tourism front line staff:

Dates discount, special service or promotion will be valid: _____

By signing this form, I have read and understood the program description found online at:
<http://www.gov.ns.ca/dtc/tourism/programs.asp>.

Signature of Applicant

Date of Application

Please return this application form:

By Mail:
Nova Scotia Department of Tourism, Culture & Heritage
Attn: Peter Johnson
PO Box 456
Halifax, Nova Scotia
B3J 2R5

By Fax: (902) 424-2668

Or Online: <http://www.gov.ns.ca/dtc/tourism/programs.asp>