



St. Patrick Tower
30 St. Patrick Street
8th Floor
Toronto, ON
M5T 3A3
Tel: (416) 360-5000
Fax: (416) 777-1567
pkftoronto@pkfcanada.com

800 West Pender Street
Suite 1120
Vancouver, B.C.
V6C 2V6
Tel: (604) 689-3833
Fax: (604) 689-2568
pkfvancouver@pkfcanada.com

Website: www.pkfcanada.com

NATIONAL TRENDS

ENROLMENT PACKAGE FOR PARTICIPATING PROPERTIES

After enrolment, participation in the TRENDS program requires five minutes or less a month. To start, please complete this enrolment package as indicated below:

- ❖ TRENDS Information Form: This form requests certain specific information that will be used to classify your property within the program and to provide certain data for special TRENDS statistical studies or for extra editions.

- ❖ Monthly Data Sheet: Please complete the monthly data sheet for each month of the current year to date with the statistics for both this year and last year. This data is normally available from your end of the month daily report. If the data is not available for each category, please provide your best estimate and mark it: "E". Where revenues are requested, please list only whole numbers, do not bother with cents.

- ❖ Please return the enrolment package (including both the information form and applicable monthly data form), and retain a copy for your records.

- ❖ We have also enclosed a data form for the following month. After enrolment, we will send you the remaining sheets. We would be most appreciative if you would fill out the requested forms and return them promptly. If you prefer, you may call, fax or email the data to us.

***ALL TRENDS CONTRIBUTIONS ARE STRICTLY CONFIDENTIAL
AND ARE ONLY PUBLISHED AS COMPOSITE AVERAGES***

TRENDS INFORMATION FORM

(Please type or print)

Property: _____

Mailing Address: _____

City/Province/Postal Code: _____

Telephone Number: _____

Fax Number: _____

Email Address: _____

Manager: _____

If you wish to have the monthly questionnaire sent directly to the accounting department, or some other staff member, please indicate below:

MONTHLY TRENDS CONTACT

Name: _____

Title: _____

Telephone: _____

Email: _____

Address (if different from property address):

TRENDS INFORMATION FORM

ROOMS

Year Opened: _____

Original Number of Rooms: _____

Current Number of Rooms: _____

Additions:

Year	No. of Rooms
_____	_____
_____	_____

Chain Affiliation: _____

Management Company: _____

Months of Operation: _____ to _____
month *month*

FOOD AND BEVERAGE OUTLETS

Name Food Outlet	No. Seats	Name Beverage Outlet	No. Seats
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

BANQUET / MEETING SPACE

Total Square Footage: _____

Total Number of Meeting Rooms: _____

Largest Meeting Room: _____ *sq. ft*

Maximum Banquet Capacity: _____

(please record the total number of seats for food and beverage service)

ESTIMATED ROOM BUSINESS MIX

Segment	Ratio to Total
Corporate/Commercial	_____ %
Meetings and Conventions	_____ %
Government	_____ %
Tourists	_____ %
Tour Groups	_____ %
Other _____	_____ %
TOTAL	100.0 %

Year: _____