

Bed & Breakfast Association of Alaska INNside Passage Chapter

Peer Review Request for Renewing Regular Members

Name of B&B _____ Phone: _____

Name of Innkeeper/Owner _____ Phone: _____

Address _____

Fax Number _____ E-mail: _____

I would like to schedule a peer review of my inn which is a requirement of membership as a Regular Member of BBAIP. Since I have made a commitment to quality and continuous self-improvement, I realize that this will be an opportunity to learn from other innkeepers and hear how my inn is seen through their eyes.

I understand that the Peer Review will be performed by a two-person team of fellow innkeepers of BBAIP who have been trained to make inspections using the Quality Assurance Checklist.

Please answer the following questions:

___ I am not required to have a Peer Review this year. My peer review was completed on: _____

___ I prefer to arrange the peer review myself by contacting two Regular Members in good standing to perform the peer review of my inn. (Contact the Peer Review Committee for names of members available.)

___ I prefer that the Peer Review Committee arrange and appoint a team to perform the peer review.

___ I am willing to furnish complimentary lodging for one night to the peer review team.

To help schedule a peer review, the best time for the peer review would be:

Dates Available _____ Weekday _____ Weekend _____

Times of the day most convenient _____

Signature _____ Date _____

PLEASE NOTE: THE BOARD OF DIRECTORS VOTED IN MAY, 2000, THAT PEER REVIEWS WERE GOOD FOR THREE YEARS. IN ORDER TO REMAIN A REGULAR MEMBER IN GOOD STANDING WITH BBAIP, A PEER REVIEW WILL NEED TO BE COMPLETED BY JANUARY 31 THREE YEARS AFTER THE YEAR THE PEER REVIEW WAS DONE. (EXAMPLE: PEER REVIEW DATE 8/19/00. COMPLETE PEER REVIEW BY JANUARY 31, 2003.)