



Membership Application

Business Name: _____

Street Address: _____

Mailing Address: _____

City: _____ State: _____ ZIP: _____

Principal Representative: _____

Contact Info

Business Phone: _____ Toll Free: _____ Mobile: _____

Email: _____ Web address: _____

Days/Hours of operation: In Season _____ Off Season _____

Business Classification (choose one)

Hotel/Motel Vacation rental/cabin B & B/Inn/Resort Campground/RV Attraction

Shopping Dining Real Estate Other Service _____

Lodging Partners: # units/rooms _____ Amenities: _____

Membership Level Desired (see brochure for description of benefits)

Community Partner Free

Business Partner \$225

Premier Partner \$500

Executive Partner \$1,000

Memberships are based on a calendar year and are billed in April and due by May 1.

(Current year membership assures inclusion in the Maggie Valley Visitor Guide the following year.)

For Office Use Only: