



MEMBERSHIP INVESTMENT STRUCTURE

Categories.....Investment

Non-Profit Organizations/Non-Business Supporting Individuals.....\$ 60.00
 Businesses w/ 3 or less employees.....\$ 125.00
 (Excluding Hospitality/Lodging/Campgrounds/Restaurants/Food service. For these categories, see investment below)

Resort or Attraction.....\$485.00
 • Ski areas & Major attractions

General Membership.....\$240.00
 • Hospitality/*Lodging/Campgrounds
 • Recreation & Entertainment
 • Retail & Consumer Services
 • Manufacturing & General Business
 • Financial/Professional Services & Real Estate
 • Other Businesses w/ 4 or more employees

Restaurant/Food service\$300.00

Lodging Members (Add).....\$12.00 (per room for all rooms over 10
 with a maximum additional of \$192.00)

Lodging Establishment with Dining Room/Restaurant (Add).....\$90.00

.....
 *NEW - A Credit Card form is also on the next page for your convenience. Thank you.

Please cut and include with your membership application and payment. Thank you!

Primary Membership Base Investment: \$ _____
 Additional Service Fee: \$ _____
 Total Investment: \$ _____
 Bill/Invoice \$ _____
 Total Enclosed: \$ _____

Please note: You are required to place a reciprocal link to www.franconianotch.org on your website. Memberships are issued to an individual business. Businesses may not share a membership. The membership year runs October 1 thru September 30. All memberships have one (1) voting privilege per business at the Annual Dinner Meeting.



MEMBERSHIP APPLICATION

Name of Business/Organization/Supporting Individual _____

Street Address _____ Town _____ State _____ Zip _____

Mailing Address _____ Town _____ State _____ Zip _____

Business Phone () _____ Fax # () _____

E-Mail Address _____ Web Site http:// _____

Contact _____ Email _____

Membership Category (See second page for dues structure and explanation)

Resort/Attraction _____ General _____ Business w/less than 3 Emp: _____ Hospitality _____

Non-Profit/Supporting Individual _____ Lodging _____ Campground _____ General _____

Other Services _____

Website Categories

Lodging properties choose two (2): Hotels/Motels _____ Cabins/Cottages _____ Inns/B&B's _____
Campgrounds _____ Functions _____ Private Rentals _____

Shopping choose one (1): Arts/Antiques _____ Specialty Shopping _____ General Shopping _____

Products Sold and/or Services Rendered: _____

Company Description: (30 words or less, please attach another sheet if necessary) _____

Reason for Joining _____ Referred by (Whom may we thank) _____

Please indicate any **Teams** you may be interested in serving on with a check mark. A Team Leader will contact you to discuss further:

Budget _____ Marketing/Advertising _____ Membership _____ Events/Fund Raising _____

Collaboration _____ Website _____ Other _____

Signature _____ Date _____

Billing Information (if different from above)

Billing Contact _____

Billing Address _____

Billing Phone # _____ Billing Email _____



CREDIT CARD AUTHORIZATION FORM

Company Name: _____

Authorized Buyers/Contact Name: _____

Email Address: _____ Phone Number: _____

CC Billing Address _____

Zip Code _____

V-Code of Card: _____

(last three digits on back of card)

Amount of Payment: \$ _____

Balance Remaining: \$ _____

Am Ex write number on line here:

Credit Card Number:
PLEASE USE BOXES

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Expiration Date: /

Card Type: Mastercard Visa Discover

Signature: _____ Date: _____

Note: Your signature authorizes an automatic debit to your card for any outstanding balances as agreed.

For Office Use Only:

<input type="checkbox"/> Approved	Date: _____	<input type="checkbox"/> Denied	Date: _____
Approval Code: _____		Retry #1 A D	Date: _____
Amount: _____		Retry #2 A D	Date: _____
<input type="checkbox"/> Approved	Date: _____	Approval Code: _____	
Approval Code: _____		Amount: _____	
Amount: _____			