



Southwestern Michigan Tourist Council Membership Application

Name of Business/Organization: _____

Contact Person: _____ Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Cell: _____

Email: _____ Website: _____

Tell us more about your business/organization:

HOURS OF OPERATION:

HANDICAP ACCESSIBLE: Yes No Details: _____

PET FRIENDLY: Yes No Details: _____

DESCRIPTION:

RECIPROCAL LINK AGREEMENT: *I understand the Tourist Council website will provide a link to my website, and I agree to establish a reciprocal link to swmichigan.org on my website.*

Signature: _____ Date: _____

Please indicate your membership type:

- Business Membership: Annual Fee \$165
- Nonprofit Membership: Annual Fee \$110

Please mail this application and your check to:

Southwestern Michigan Tourist Council
2300 Pipestone Road
Benton Harbor, MI 49022