

Membership Application

Print and Online Publication Information

Business/Organization _____
 Physical Address _____
 City/Town _____ State _____ Zip _____
 Phone _____ Toll Free _____ Fax _____
 Website _____ E-mail _____
 Business Category _____ (See NBCVB Visitor Guide, pg. 42 & 43)
 Description (25 words or fewer) _____

Contact and Investment Information

Main Contact _____ Phone _____
 Title _____ E-mail _____
 Billing/Mailing Address _____
 City/Town _____ State _____ Zip _____
 Membership Investment (see rates sheet) _____ (Tax Deductible Business Expense)
 If applicable, # of Rooms _____ # of Seats _____ Annual Attendance _____
 Paying by Check AMEX MC VISA CC# _____
 Cardholder _____ Expiration _____

I am interested in hearing about special NBCVB member opportunities (check below).

- Brochure Rack at Visitor Center Brochure Tag-a-long Distribution at Visitor Center
 Upgraded Web Listing including photos and 150 word description Banner Advertising
 Regional Driving Map & Visitor Guide

Send application to Rachel Abdulla, e-mail: rachel@northofboston.org, fax: 978-977-7758 or
 mail: North of Boston Convention & Visitors Bureau, 17 Peabody Square, Peabody, MA 01960.

Today's Date _____ Referred By _____

Inter-office:

- Website IRM Welcome E-mail Directory FI