



AGRITOURISM REGISTRATION
 ND DEPARTMENT OF COMMERCE/TOURISM DIVISION
 SFN 59981 (4/2014)

Please complete all information as required by House Bill 1142, The Agritourism Liability Act. **The following information is for promotional purposes and will be published by the North Dakota Tourism Division.**

Business Name		Phone Number		Website	
Physical Address of Agritourism Business – include GPS coordinates.			City	State	ZIP Code
Type of agritourism experience offered (please check all that apply):					
<input type="checkbox"/> Ranch Vacations	<input type="checkbox"/> Horseback Riding	<input type="checkbox"/> Hunting/Fishing	<input type="checkbox"/> U-Pick Gardens	<input type="checkbox"/> Vineyards/Wineries	
<input type="checkbox"/> Seasonal Events	<input type="checkbox"/> Farm Tours	<input type="checkbox"/> Education Vacations	<input type="checkbox"/> Farmers Markets/Product Sales		
<input type="checkbox"/> Other _____					
List services, activities, facilities and amenities provided:					
Seasonality (check all that apply):					
<input type="checkbox"/> Year Around	<input type="checkbox"/> Spring	<input type="checkbox"/> Summer	<input type="checkbox"/> Fall	<input type="checkbox"/> Winter	
<input type="checkbox"/> Special Event Dates Only		<input type="checkbox"/> Other _____			
Please give a detailed description of all agritourism experiences offered to your guests. (please attach a separate page if additional space is needed)					
Please provide a brief (limit to 150 words) promotional paragraph about your agritourism experience.					

The following registration information will not be published by the North Dakota Tourism Division.

Principle Owner Name		Cell Phone Number	
Mailing Address	City	State	ZIP Code
Email Address	Website Address	Fax Number	
Month/Year Agritourism Business was Established	Contact Person		
Signature		Date	