



AGRITOURISM REGISTRATION
 ND DEPARTMENT OF COMMERCE/TOURISM DIVISION
 SFN 59981 (12/2019)

Be Legendary.™

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 Department of Commerce Tourism division.

Business Name		Phone Number		Website	
Physical Address of Agritourism Business – include GPS coordinates.			City	State	ZIP Code
Type of agritourism experience offered (check all that apply):					
<input type="checkbox"/> Ranch Vacations		<input type="checkbox"/> Horseback Riding		<input type="checkbox"/> Hunting/Fishing	
<input type="checkbox"/> Seasonal Events		<input type="checkbox"/> Farm Tours		<input type="checkbox"/> U-Pick Gardens	
<input type="checkbox"/> Other _____		<input type="checkbox"/> Education Vacations		<input type="checkbox"/> Vineyards/Wineries	
		<input type="checkbox"/> Farmers Markets/Product Sales			
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"/> Special Event Dates Only		<input type="checkbox"/> Other _____		<input type="checkbox"/> Fall	
				<input type="checkbox"/> Winter	
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The following registration information will not be published by the North Dakota Department of Commerce Tourism division.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	