



**Email:**  
join@VISITFLORIDA.org

Submit by Email



**Fax:**  
(866) 725-5958

Print Form



**Mail:**  
**VISIT FLORIDA**  
2540 W. Executive Center Circle, Suite 200  
Tallahassee, FL 32301

## Company Information

(Print clearly as company information will appear in VISIT FLORIDA online listings)

Company Name (D.B.A.)

Type of Business (ex: hotel, attraction, outdoor activity, retail)

Physical Address

Phone Fax

City State Zip

Website



Facebook URL



Twitter URL

Email

Toll-free

## Contact Information for VISIT FLORIDA Correspondence

Mr./Mrs./Ms.

Contact to Receive Correspondence

Title

Mailing Address for Correspondence

City State Zip

Work Phone Cell Phone

Fax Email

## Florida Lodging License Requirement (Accommodations Only)

To comply with Florida law, all Accommodations, Property Management Companies and Vacation Rentals by Owner must have a current Florida Lodging License. You are required to submit your current lodging license number to VISIT FLORIDA for verification.

**LODGING LICENSE NUMBER:** \_\_\_\_\_

For more information on obtaining and applying for a Florida Lodging License, please go to the Florida Department of Business & Professional Regulation's website at [www.myfloridalicense.com/dbpr](http://www.myfloridalicense.com/dbpr) or call their Customer Contact Center at (850) 487-1395.

## Partnership Levels (Select one)

- Premier Marketing Partner** - \$1,500/year (An Enhanced Web Listing is included in the Premier Partner level)
- \*Small Business Marketing Partner** - \$395/year (An Enhanced Web Listing is included in the Small Business Partner level)  
\*For eligibility, your gross revenues may not exceed \$1.25 million per year or your business must be a 501 (C) (3) organization under IRS guidelines
- Enhanced Web Partner** - \$365/year for annual online listing
- Basic Web Partner** - \$95/year for annual online listing
- \*\*Business-to-Business Partner** - \$500/year  
\*\*Applicable for allied/vendor of goods and services

## Optional Service - \$29.95

- Web listing set-up service fee** - VISIT FLORIDA staff will personally work with you to upload your photos, videos, Hot Deals, events, description, social media links and more to your listing during a custom set-up session.

## Additional Information

What type of customer can we help you reach?  
(select all that apply)

- Consumer       Meeting Professionals  
 Media       Travel Trade/Travel Agency

Complete below if business is an accommodation

Number of sleeping rooms or number of units: \_\_\_\_\_

Complete below if property has meeting space

Number of meeting rooms: \_\_\_\_\_ Total square footage of meeting space: \_\_\_\_\_

If you selected the Premier Partner level, please list any restaurants owned and operated on property that are open to serve the public.

Restaurant name(s):

Meal period served (select all that apply):

- |       |                                    |                                |                                 |
|-------|------------------------------------|--------------------------------|---------------------------------|
| _____ | <input type="checkbox"/> Breakfast | <input type="checkbox"/> Lunch | <input type="checkbox"/> Dinner |
| _____ | <input type="checkbox"/> Breakfast | <input type="checkbox"/> Lunch | <input type="checkbox"/> Dinner |
| _____ | <input type="checkbox"/> Breakfast | <input type="checkbox"/> Lunch | <input type="checkbox"/> Dinner |

## Agreement & Payment Information

I/we, the undersigned, hereby make application for partnership with VISIT FLORIDA and understand that payment is due at time of application. I/we understand my partnership covers a 12-month period and is non-refundable with an option for renewal billed annually on anniversary date. I/we attest that the business establishment that we are promoting is licensed to conduct business in the State of Florida and that we are fully compliant with city, county, state and federal tax requirements. By providing your contact information, you are agreeing to receive communications via mail, email, fax and/or telephone sent by or on behalf of VISIT FLORIDA.

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Preferred Method of Payment: Check  (payable to VISIT FLORIDA) or Credit Card. Total Payment = \$ \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



\_\_\_\_\_

\_\_\_\_\_



Once your partnership has been approved and processed, you will receive a confirmation email receipt within 3-5 business days. Accompanying your confirmation receipt will be your login information which will grant you access to activate your listing(s).



Call the VISIT FLORIDA Industry hotline at (877) 435-2872 with questions.