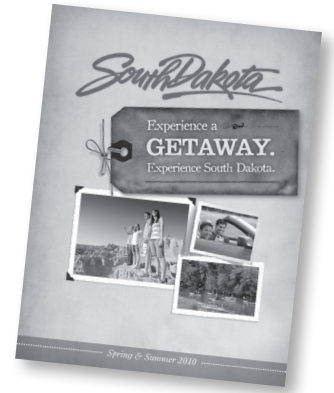


# 2010 Shoulder Great Getaways Registration Form

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YES! I want to participate in the 2010 Shoulder Season Great Getaways Co-op. I have enclosed the \$450 payment, payable to South Dakota Office of Tourism, or submitted payment online with a credit card at [www.SDVisit.com](http://www.SDVisit.com). I have also sent one high-quality digital image (with no logo or map inserted into the photo) and 40 words of copy to Natasha Bothun at [Natasha.Bothun@state.sd.us](mailto:Natasha.Bothun@state.sd.us).

**REMEMBER:** Shoulder Great Getaways is limited to 42 partners on a first-come, first-served basis: You are not fully registered until we receive your form, payment, photo and 40 words of copy.

**RETURN: Form and payment:** Office of Tourism, 711 E Wells Ave., Pierre, SD 57501  
**Photo and 40 words copy:** [Natasha.Bothun@state.sd.us](mailto:Natasha.Bothun@state.sd.us)

(PLEASE PRINT)

## BUSINESS INFORMATION

As it will appear in this publication

\_\_\_\_\_  
Business Name

\_\_\_\_\_  
Business Address street/avenue/road

\_\_\_\_\_  
City/State/Zip

\_\_\_\_\_  
Business Phone

\_\_\_\_\_  
Business Fax

\_\_\_\_\_  
Web Address

\_\_\_\_\_  
Business Email

\_\_\_\_\_  
Ad Heading business name only, six words or less

## CONTACT INFORMATION

To be contacted by the Office of Tourism

\_\_\_\_\_  
Contact Name

\_\_\_\_\_  
Contact Address

\_\_\_\_\_  
City/State/Zip

\_\_\_\_\_  
Contact Phone

\_\_\_\_\_  
Fax

\_\_\_\_\_  
Contact Email

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date