



Virginia Oyster Trail Trail Enrollment Application Form

*Business Name: _____

Business Owner's Name: _____ *Public Contact's Name _____

Business Phone: _____ *Public Phone: _____

Business Email: _____ *Public Email: _____

*Web Address (If Applicable/No Facebook): _____

*Physical Virginia Address: _____
Street City Zip County

Mailing Address (if different or for credit card verification):

Street City Zip County

I am interested in becoming a volunteer: Yes ___ No ___ * required and will be published at VirginiaOysterTrail.com

Type of Virginia Oyster Related Trail Site	One-Time Set-Up Fee	Annual Fee	Total First Year	Amount of payment included with my application
Watermen, Watermen Tours, Farm/Seafood Markets, etc.	\$50	\$50	\$100	
Winery/Vineyards	\$50	\$100	\$150	
Restaurants				
Lodging				
Cultural Points of Interest (Historical, On-Water Adventures, Festivals, etc.)				
Artist Studio /Art Venues				

Check Enclosed _____ Credit Card # _____ Exp _____ CVV# _____

Participation Statement:

I would like to participate in the Virginia Oyster Trail (VOT). I affirm that my business meets the Virginia Oyster specific criteria for inclusion. I understand that my application submission does not guarantee participation on the Trail and that the VOT reserves the right to make the final determination acceptance based on my Virginia Oyster relevancy. I understand that a representative of the VOT may contact me to schedule a site prior to approval of my application. I agree to submit the applicable fees and further allow the VOT to use/publish information about my business, including images I post to my trail site profile page or from my website/print materials, in VOT promotions, online and in print. I understand that membership on the trail includes a one-time trail set up fee and renewable annual fee. I further am aware that participation on the Trail is a shared-responsibility and will do my part to ensure my online page and calendar entries are enticing and relevant. I understand that my trail sign is a free lease as long as I am an active member. By submitting this application, I hereby acknowledge that I am the owner of the above-referenced business or authorized by the owner to submit this information on behalf of the owner. The information provided on this form is correct to the best of my knowledge.

Signature

Date

Return completed form and fees to:
 Virginia Oyster Trail, P.O. Box 166, Greenville, VA 24440
 getinvolved@virginiaoystertrail.com, 540-377-6489. VirginiaOysterTrail.com