Mississippi Agritourism Registration Application

MISSISSIPPI DEPARTMENT OF AGRICULTURE AND COMMERCE

Check all that apply:
☐ First application
☐ Repeat Application
☐ Added activity application
☐ Website application
Date received:
(Office use only)

Eligibility Requirements

Determination of eligibility shall be made by the Mississippi Department of Agriculture and Commerce. Registration guidelines, as well as a list of agritourism activities prepared by the Mississippi Department of Agriculture and Commerce, the Mississippi Development Authority, and the Mississippi Agritourism Association are included in this application and may also be found on the

Instructions

To be covered by the Agritourism Limited Liability Law, an agritourism professional must register with the Mississippi Department of Agriculture and Commerce on an annual basis. Additionally, the agritourism professional must pay an annual fee in the amount of fifty dollars (\$50.00) to the Mississippi Department of Agriculture and Commerce at the time of registration.

Type or print appropriate responses in the spaces provided and return this form, along with the \$50.00 registration fee (Check or money order only, please) to Donna West, Mississippi Department of Agriculture and Commerce, P.O. Box 1609, Jackson, MS 39215. Incomplete applications will not be accepted.

Upon receipt of the application, the Mississippi Department of Agriculture and Commerce will review and make contact upon approval.

Agritourism Venue Information

Name of Agritourism Venue:						
Contact Name:						
Physical Address:						
Mailing Address:						
County:	City:	Zip Code:				
Business Phone Number:	Cell Phone Number:					
Fax Number:	Email:	Email:				
Website Address:	Facebook Page:	Twitter:				
Agr	itourism Venue Structui	re				
Provide a brief description of your ver	nue:					
Directions to venue (i.e. from major Ir	nterstate or Highway, or from closest o	city):				

Select the appropriate response	that defines your b	usiness struc	cture:			
□ Sole Proprietorship			□ Limited Liability Company			
□ Partnership □ Corporation			□ Joint Venture□ Other			
How long have you been in busin	ness?					
Number of visitors to visit your v	enue each year (est	timate):				
Describe the property placement	t of required warnin	ıg signage:				
List the various activities or spec	ial events offered a	t your agrito	ourism venue.			
Activity Name	Annual Yes/No	Start Date	Ending Date	Fees Yes/No	Reservation Required	
Please include a current brochure, on the Mississippi Department of Mississippi Tourism Division of the promotion.	Agriculture and Com	nmerce webp	age. All inforr	mation will be	shared with the	
<u>Disclaimer</u> : The Mississippi Depa registering agritourism profession						
By my signature on this form, I he	reby certify that the	above provi	ded informatio	on is true and a	occurate.	
Authorized Signature:			Date			
Printed Name:		Title:				