



Business Registration Form

Today's Date:

Business Name:

Physical Business Address1:

Physical Business Address2:

City: State: Zip:

Mailing Address (if different than Physical Business Address):

Mailing Address1:

Mailing Address2:

City: State: Zip:

Business Phone #:

Email Address:

Business Employer Identification Number (EIN):

What type of discount you are offering NJTG Discount Cardholders?

(Example: 10% off your order or \$5 off \$30 spent, etc. You choose the deal!)

Annual Registration Fee is \$100/yr

Method of Payment:(Check One) Total Amount Due to NJTG:

Check (Payable to Giant Impact Group dba NJTownGuide.com)

Credit: (Visa/MC only)

Name as it appears on credit card:

Credit card billing address1:

Credit card billing address2:

City State: Zip: 3-digit CID (From back of card):

Accepted by:

By filling in your name above you approve of the charges as described in this form.

*Please save form and email to advertising@njtownguide.com or print and fax to 973-428-1957.