



2019 CONVENTION & VISITORS BUREAU

ANNUAL BUDGET

Under \$100,000:	\$280.00
\$100,000 - \$250,000:	\$375.00
Over \$250,000:	\$475.00

CVB Name: _____

Primary Contact: _____ Title: _____

Other Contact: _____

Address: _____

City, State, Zip: _____

Telephone: _____ Fax: _____

Email: _____ Web Site: _____

PAYMENT INFORMATION

Billing Contact: _____

Payment Type: American Express Master Card Visa Check (please make payable to WVHTA)

Account #: _____ Expiration Date: _____

Cardholder: _____ Signature: _____

Return this form to: WVHTA, P.O. Box 2391, Charleston, WV 25328
Fax: 304-345-1538 or join online: www.wvhta.com