

**Illinois & Michigan Canal National Heritage Corridor Canal Alliance
Tourism Working Groups Contact Information Form**

Name _____

E-mail _____

Address _____

Phone _____

Are you a Canal Alliance member? Yes No

Please list any background or qualifications you have to help the Tourism Working Groups?

Which Tourism Working Group are you interested in?

- Tourism Alliance Working Group (limited to state sponsored agencies)
- Tourism Partners (anyone, business or individual, involved in tourism)
- Designated Sites & Events

Are you interested in your name being submitted for membership in the Tourism Committee?

Yes No

How many days are you willing to volunteer annually for the Tourism Working Groups?

- A couple times a year
- Once a month
- Twice a month
- Once a week
- Other _____

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Do you know anyone who might be interested in joining the IMCNHC Canal Alliance and helping us achieve the vision, mission, and goals of the national heritage corridor? Please provide the name and e-mail address and we will send them an invitation to join the Canal Alliance.

Name _____

Email _____

Name _____

Email _____

Name _____

Email _____

Name _____

Email _____