



Amusement Tax Registration Form

(Pursuant to Village of Hawthorn Woods Municipal Code Chapter 5)

Name of Business (DBA)

Telephone

Business Location Address

City

State

Zip Code

Date Open for Business

Company/Corporate Name if Different from DBA

Telephone

Corporate/Company Address

City

State

Zip Code

Name of Owner or Manager

Telephone

Nature of Business (i.e. golf, amusement park, etc.): _____

Estimated Annual Sales Subject to Amusement Tax: _____

Federal Taxpayer ID Number or Social Security Number: _____

Name of Amusement Tax Return Preparer: _____

Preparer's Telephone: _____

I declare that I have examined this registration form, and to the best of my knowledge, the information entered on this form is true, correct, and complete.

Signature of Applicant

Date

Please return this for to: **Village of Hawthorn Woods, 2 Lagoon Drive, Hawthorn Woods, IL 60047**
Phone: 847-438-5500 Fax: 847-438-5523