## NASHVILLE CARES RESTAURANT AGREEMENT

#### AS A PARTICIPANT IN DINING OUT FOR LIFE® YOU AGREE TO:

- 1. Contribute to Nashville CARES a minimum of 25% of gross food and non-alcoholic beverage for all patrons dining on Tuesday, April 20, 2021, including dine-in, to-go and curbside orders (unless another date and amount is authorized in writing by Nashville CARES). Delivery orders may be included if indicated on the written agreement form.
- 2. Allow Nashville CARES to use this restaurant's name, location, and phone number in materials and communications promoting the event.
- 3. Promote the event by displaying provided Dining Out For Life® poster and distributing provided promotional materials at the restaurant prior to and during the event, promote the event on restaurant's Facebook page, newsletters, and other social media marketing (as applicable).
- 4. Permit Nashville CARES volunteers to help promote your restaurant, invite people to dine that day.
- 5. Report results to Nashville CARES by May 3, 2021 for final results. Pre-tax gross sales for all patrons served (not just those specifying Dining Our For Life®) shall be the basis for calculating the contribution due. Mail contribution to Nashville CARES by May 21, 2021.

### IN EXCHANGE, NASHVILLE CARES WILL:

- 1. Promote the participating restaurant via the Dining Out For Life® website with restaurant name, phone number, street address and a live link to restaurant website.
- 2. Coordinate a publicity campaign to promote Dining Out For Life® via local radio, television, print media, social media marketing and email campaigns with more than 6.8 million impressions.
- 3. Provide attractive, quality event promotional materials that may include posters, table tents, check inserts, invitations, and other printed items.
- Recruit volunteers to invite friends, family and colleagues to dine with restaurants for Dining Out For Life® on April 20, 2021.
- 5. Report overall event results to all participants.

# **NASHVILLE CARES RESTAURANT AGREEMENT**

Please return completed agreement to DOFL@NashvilleCARES.org

#### PARTICIPATING LOCATION INFORMATION

(Please list all information as you would like listed in ads)

Restaurant Name						
Street Address		City		ST	ZIP	
		Manager's email				
Manager's Phone						
Point of Contact (Day Of)		Email				
		Best Time to Contact				
MARKETING CONTACT INFORMA	TION					
Marketing/PR Firm Contact Name			Ph			
Email	Website					
Facebook						

# GIFT CARD DONATION

Support Nashville CARES by donating a gift card from your restaurant valued at \$25.00 or more. Restaurants that provide a gift card will receive extra promotion leading up to the event and at other Nashville CARES events. Would your restaurant like to donate a gift card? \_\_\_\_yes \_\_\_\_ no If yes, \$ \_\_\_\_\_ PROMOTIONAL MATERIALS Please estimate quantities for each Dining Out For Life® promotional materials you will use from March 20 - April 20. Check inserts Posters Table Tents DINING OUT FOR LIFE® AGREEMENT I want to participate (please check one): Main DOFL Day - Tuesday, April 20 I would like to discuss Saturday or Sunday options (April 17/18) I will participate (check all that apply) ( ) Lunch / Hrs \_\_\_\_\_ ( ) Dinner / Hrs \_\_\_\_\_ ( ) Brunch / Hrs \_\_\_\_\_ Breakfast / Hrs \_\_\_\_\_ Yes, I would like to include alcohol sales in our contribution. **DINING OPTIONS** [CHECK ALL THAT APPLY] Outdoor Dining (Capacity \_\_\_\_\_\_) Curbside to-go In-door Dining (capacity\_\_\_\_\_) Online Ordering Delivery I WISH TO CONTRIBUTE (MINIMUM OF 25%) 50% 25% 75% \*100%

\*Interested in participating at 100%? Contact us for promotional opportunities related to this level of participation. 100% participants will be listed as sponsors for all CARES events for one year.

By signing this document I confirm that I have read and agree to all Dining Out For Life® participation information as described on the opposite page and we will participate in Dining Out For Life® 2021 as outlined above.

Authorized Representative's Signature: \_\_\_\_\_\_ Date \_\_\_\_\_\_ Date Authorized Representative's Name & Title (please print): \_\_\_\_\_