



Western Lehigh Area Restaurant Week

**Deadline to register
is May 27, 2019**

June 9th—June 15th 2019

Thank you for your participation in Western Lehigh Area Restaurant Week

Restaurant Name: _____

Address: _____

Phone Number: _____ Fax Number: _____

Website: _____

Social Media Link: _____

Contact Person Name: _____ Phone: _____

Contact Person's Email Address: _____

I agree to the following / have enclosed the following Restaurant Week registration materials:

I have enclosed my registration check for \$60.00 (Chamber Member) or \$120.00 (Future Chamber Member)
(Not a member of the Chamber yet and interested in joining to take advantage discounts and benefits? Call Ashley!)
Please make checks payable to "The Greater Lehigh Valley Chamber of Commerce" and send to: 191 Main St., Suite 205, Emmaus, PA 18049.

I agree to format logos of title sponsors on my Restaurant Week menus & send completed menu to: ashley@lehighvalleychamber.org no later than **5/27/19**. **Menus without sponsor logos will not be posted to website** or shared on social media.

I will provide 2 gift cards / gift certificates for Western Lehigh Area Restaurant Week promotional give-aways and advertising campaign use. Each must be a value of at least \$25.00.

I will forward my restaurant logo in **jpg** format to use in promotion of Western Lehigh Restaurant week.

I will ensure that any promotional materials that are distributed for WLRW will be posted in my establishment and that I will help to promote the event on my social media outlets, website and customer emailings. (Please use #WLCCRW and tag @WesternLehighChamber)

I understand that until I submit the above materials, I am not registered for Restaurant Week.

NAME (Signature): _____ **DATE:** _____

NAME (Print): _____

I wish to pay with Credit Card: Type of card _____ Card # _____ exp. Date _____ Code _____

Please complete and return to GLVCC, attn: Ashley Lorah

191 Main Street, Suite 205 | Emmaus, PA 18049