



6th Annual CARROLL COUNTY RESTAURANT WEEK,
AUGUST 14-21, 2016.

REGISTRATION FORM

Restaurant Name	Contact person
Street Address	
City	Zip code
Phone	Fax
Email	Website

- I understand and acknowledge that with my participation during Carroll County Restaurant Week, my restaurant will offer the *prix fixe* menu during my restaurants' operating hours, every day of the week throughout restaurant week, with special menu offerings at the fixed price (*ending in .16¢ for the current year*).
- I agree to adhere to the parameters of pricing with menu offerings beginning from **\$10.16** and in \$5 increments.
- I agree that selected prix fixe menu items must be from my restaurants normal menu offering.
- I reserve the right to offer one-, two- or three-course meals, for breakfast, lunch and dinner.
- I agree to clearly indicate the number of people served within the specified prix fixe offering.
- My restaurant reserves the right to exclude beverages, taxes and gratuity in the prix fixe menu.
- I will clearly communicate my restaurant's options and menu on my restaurant's own website no later than August 1, 2016.
- I understand and acknowledge that my restaurant name, logo, Restaurant Week menu, type of cuisine, and hours of operation will be included in Carroll County Restaurant Week website. My website will be linked to the Carroll County Restaurant Week website, Carroll County Restaurant Week Facebook page, courtesy of 'bytes and words', and the Carroll County Chamber of Commerce website and the Carroll County Department of Economic Development / Tourism Office website.

Payment Method

Participation fee	\$ 150
<input type="checkbox"/> Check (<i>made payable to</i>) CARROLL COUNTY CHAMBER OF COMMERCE	<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express
	Name as appears on card (<i>print</i>)
	Card No:
	Exp. (MM/YR) / Security code

Billing address		
City	State	Zip code

<i>By signing to the right, I agree to the participation terms and conditions stated herein and agree that the Carroll County Chamber of Commerce may charge the indicated credit card for the participation fee listed above.</i>	X Signature	Date
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Your registration form must be received by June 15, 2016. Your menu must be received by June 30, 2016

RESTAURANT WEEK

Carroll County Chamber of Commerce
 9 East Main Street, Westminster, MD 21157

Office: 410-848-9050 Fax: 410-876-1023 *or scan and send to the email address below*

** Your restaurant logo must be submitted in .JPEG format to **psoper@carrollcountychamber.org** **