



RESTAURANT AGREEMENT

Wednesday, April 22, 2015

AS A PARTICIPATING RESTAURANT, YOU AGREE TO:

1. Donate to Project Angel Food (PAF) a minimum of 20% gross of the meals (selected below) served on **Wednesday, April 22, 2015** regardless of other promotions occurring the same day.
2. Send a check made payable to Project Angel Food with the total amount due by **Wednesday, May 13, 2015**.
3. Inform wait staff, managers and other restaurant staff about Eat. Drink. Be An Angel. (EDBA) to help promote the event to diners and answer basic questions. PAF will provide a fact-sheet or can have an informed ambassador visit your staff for a short briefing.
4. Allow PAF to use, without cost or charge to PAF, your restaurant's name in Eat. Drink. Be An Angel. promotions.
5. Reach out to your restaurant supporters via social media, e-blasts, signage etc. to garner interest in supporting PAF and Eat. Drink. Be An Angel.

PROJECT ANGEL FOOD AGREES TO:

1. Use our volunteers, media contacts, staff & community contacts to fill your restaurant on **Wednesday, April 22, 2015**.
2. Produce and distribute attractive, quality promotional materials including posters, invitations, and other printed items.
3. Coordinate a general publicity campaign to promote Eat. Drink. Be An Angel. via local radio, television, print media, internet, Project Angel Food newsletters and Project Angel Food Board of Directors' personal contacts.
4. Mail Eat. Drink. Be An Angel. postcards with complete list of participating restaurant names to date to over 5,000 supporters. Send email blasts to Project Angel Food's email list of 50,000 donors and friends to drive traffic to restaurants.
5. Assign a representative at Project Angel Food to ensure that all logistics of the partnership with your restaurant are fulfilled efficiently and to your best advantage.

YES! I would like to participate in Eat. Drink. Be An Angel. on Wednesday, April 22, 2015.

I will contribute: 20% (minimum) 25% 30% 50% 100%

Of (check all that apply): Food & Alcoholic Beverages Food & Non-Alcoholic Beverages

During (check all that apply): Breakfast/Brunch Lunch Dinner

Restaurant Name		Address	
Authorized Representative and Title		Signature	Date
Phone #	Email Address		Website
Facebook	Twitter	Instagram	Other social media

RETURNING THIS FORM:

EMAIL: gostrander@angelfood.org, Genevieve Ostrander, Events Manager; FAX: (323) 337-9650; MAIL: Project Angel Food, Eat. Drink. Be An Angel. Attn: Genevieve Ostrander, 922 Vine Street, Los Angeles, CA 90038.

For more information or questions, contact gostrander@angelfood.org or (323) 845-1800 x210.