



Westport-Weston Chamber of Commerce Presents Our Fall Restaurant Week Sunday, September 29th-Saturday, October 12th, 2013!

Westport-Weston Chamber of Commerce is sponsoring Restaurant Week this fall for two (2) weeks from Sunday, September 29th-Saturday, October 12th. We invite your participation and encourage you to consider joining the Chamber as well. We have a lot of new benefits and programs that are available to our Chamber members, and with your restaurant as a member, we can be a stronger Chamber serving our business community, residents and visitors alike!

Some new and exciting additions to our Restaurant Week this season are the following:

- We will be providing a 3 question survey to gather data from each diner during restaurant week. The Chamber will collect all surveys, enter the information into an excel data base and share the information with our restaurant and retail partners for future cross promotional opportunities. As a thank you to the diners, we will be providing discount coupons from the Westport Country Playhouse along with other retail partners.

Format:

Menu: Participating restaurants will offer a special prix-fixe lunch and/or dinner menu during the entire 2 week period. Dinner will consist of 3 courses, appetizer, entrée and a choice of either dessert or beverage. Lunch will consist of 2 courses, entrée and a choice of dessert or appetizer. Each restaurant will select the price point (per person, excludes tax and tip) that they will offer:

\$10 or \$15 – Lunch for one

\$20.00 or \$30.00- Dinner for one

**Marketing/Advertising/Participation Costs: \$275 per Westport-Weston Chamber Member,
\$375 per Future Member!**

Marketing/Advertising Campaign will include Press releases to all local news media which will include the names of the all participating restaurants.

- Posters will be posted around town, at local businesses and participating restaurants.
- Print Ads will be placed in the local papers
- Advertising will be placed on local internet websites

- All information regarding Restaurant Week, will be promoted on the Westport-Weston Chamber website, including a prominent web banner and an information page listing all participating restaurants, menus with links to your websites.

If you are interested in having your restaurant participate in Westport-Weston Restaurant Week, simply fax or mail the attached registration form and credit card payment/check to the Westport-Weston Chamber of Commerce (all checks should be made out to the Westport-Weston Chamber of Commerce). **ALL REGISTRATION MUST BE RECEIVED BY FRIDAY September 6th TO BE INCLUDED IN OUR PRINT AD AND MEDIA CAMPAIGN!**

Here's to great event!

Best,

Lisa Parrelli Gray
Executive Director, President
Westport-Weston Chamber of Commerce



Westport Restaurant Week Participation Agreement

September 29th – October 12th, 2013

Please sign the following agreement and return it to the Westport-Weston Chamber of Commerce, with your check payable to the Westport-Weston Chamber of Commerce or credit card information for \$275 (members) \$375 (future members) to The Westport-Weston Chamber of Commerce, 41 Riverside Avenue, Westport, CT 06880, or fax to 203-454-4019 no later than Friday September 6th, 2013.

- This agreement serves as a receipt of your payment to participate in Restaurant Week
- **The undersigned restaurant agrees to create and distribute a special prix fixe menu, with a minimum of three (3) choices for appetizers and three (3) choices for entrée which will be offered in addition to their regular menu, and distributed to all patrons during the two (2) week- long event, Sunday, September 29th – October 12th, 2013.**
- **The undersigned restaurant agrees to assist in the promotion of the Westport - Weston Restaurant Week through in house print materials (provided), individual websites and data base emails**
- **We will offer the following prix fixe menu price point: (Please circle)**

\$10 OR \$15 – Lunch for one

\$20 OR \$30 – Dinner for one

Restaurant Name: _____

Restaurant Owner/Manager Signature: _____

Printed Name: _____

Check # / Amount: _____

Credit Card #: _____ Exp. Date: _____