



2011 Participation Agreement

Please return this form by **Sept. 1st** to:

Santa Barbara Downtown Organization
 PO Box 240
 Santa Barbara, CA 93102
Fax (805) 962-3286

OR click 'Submit' in the top right corner

Please complete the following contact information:

Venue/Business: _____

Address: _____ Zip: _____

Contact: _____ Title: _____

Phone: _____ **Email:** _____

Facebook Page: _____ Twitter Page: _____

(email address will be used to communicate program coordination only and will not be shared or sold)

Are you a member of the Santa Barbara: Conference & Visitors Bureau and Film Commission (CVB)
 Downtown Organization (DO)

Describe your type of business: Restaurant/Lounge Retailer Art/Cultural Venue Market/CSA
 Tour Operator Festival Winery Hotel Other _____

TERMS:

Yes! We would like to participate in epicure.sb in October 2011; and we agree to the following:

- **We will offer a unique promotion or event in order to be included**
- We will provide descriptions and details on our event(s) to the Downtown Organization no later than **Sept 1st, 2011** in order to be included in the promotional efforts
- We understand that if we do not meet the deadline our information may not be published in the promotional materials
- We agree to display epicure.sb information in a visible location onsite
- We agree to promote our event(s) through our own marketing means including mailing and email lists, our website and any in-store promotions
- Please describe how you plan to promote your event(s) in addition to the CVB & DO's efforts:

Are you interested in co-op advertising opportunities to promote your event? Yes No

Signature: _____ Date: _____

Please describe your events/promotions on the next page...

#1 Event/Promotion details:

Event Title: _____

Event Day & Date: _____

Event Time (specify start and finish if applicable): _____

Event Occurrence (specify single event or multiple days): _____

Event Address: _____ Zip: _____

Phone for Info: _____ Email for Info: _____

Website for Info: _____

Event Cost (if any): _____ Tickets/RSVP Info: _____

Event Details (600 characters or less):

#2 Event/Promotion details: if more than one event, print form again and submit each separately.

Event Title: _____

Event Day & Date: _____

Event Time (specify start and finish if applicable): _____

Event Occurrence (specify single event or multiple days): _____

Event Address: _____ Zip: _____

Phone for Info: _____ Email for Info: _____

Website for Info: _____

Event Cost (if any): _____ Tickets/RSVP Info: _____

Event Details (600 characters or less):

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For additional information regarding epicure.sb

Contact: Ashleigh Davis. adavis@sbdo.org. 805.962.2098