



## NASHVILLE CARES FOOD TRUCK AGREEMENT

### AS A PARTICIPANT IN DINING OUT FOR LIFE® YOU AGREE TO:

1. Contribute to Nashville CARES a percentage of gross food and non-alcoholic beverage for all patrons dining on Tuesday, April 20, 2021 (unless another date and amount is authorized in writing by Nashville CARES).
2. Allow Nashville CARES to use this food truck's name and location in materials and communications promoting the event.
3. Promote the event by displaying provided Dining Out For Life® poster and distributing provided promotional materials at the food truck prior to and during the event, promote the event on food truck's Facebook page, newsletters, and other social media marketing (as applicable).
4. Permit Nashville CARES volunteers to help promote your restaurant, invite people to dine that day.
5. Report results to Nashville CARES by May 3, 2021 for final results. Pre-tax gross sales for all patrons served (not just those specifying Dining Our For Life®) shall be the basis for calculating the contribution due. Mail contribution to Nashville CARES by May 21, 2021.

### IN EXCHANGE, NASHVILLE CARES WILL:

1. Promote the participating food truck via the Dining Out For Life® website with food truck name, phone number, street location and a live link to food truck website (if applicable).
2. Coordinate a publicity campaign to promote Dining Out For Life® via local radio, television, print media, social media marketing and email campaigns with more than 6.8 million impressions.
3. Provide attractive, quality event promotional materials that may include posters, table tents, postcards/handouts, invitations, and other printed items.
4. Recruit volunteers to invite friends, family and colleagues to dine with restaurants for Dining Out For Life® on April 20, 2021.
5. Report overall event results to all participants.

## NASHVILLE CARES FOOD TRUCK AGREEMENT

Please return completed agreement to [DOFL@NashvilleCARES.org](mailto:DOFL@NashvilleCARES.org)

### PARTICIPATING LOCATION INFORMATION

(Please list all information as you would like listed in ads)

Food Truck Name \_\_\_\_\_  
 Street Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_  
 Manager's Name \_\_\_\_\_ Manager's email \_\_\_\_\_  
 Manager's Phone \_\_\_\_\_ Fax \_\_\_\_\_  
 Point of Contact (Day Of) \_\_\_\_\_ Email \_\_\_\_\_  
 Phone \_\_\_\_\_ Best Time to Contact \_\_\_\_\_

### MARKETING CONTACT INFORMATION

Marketing/PR Firm Contact Name \_\_\_\_\_ Ph \_\_\_\_\_  
 Email \_\_\_\_\_ Website \_\_\_\_\_  
 Facebook \_\_\_\_\_ Instagram \_\_\_\_\_ Twitter \_\_\_\_\_

**Have questions? Contact Nashville CARES at [DOFL@NashvilleCARES.org](mailto:DOFL@NashvilleCARES.org)**

Dining Out For Life® is a fundraiser benefiting Nashville CARES, a 501(3) nonprofit organization.



## GIFT CARD DONATION

Support Nashville CARES by donating a gift card from your food truck. Food trucks that provide a gift card will receive extra promotion leading up to the event and at other Nashville CARES events.

Would your food truck like to donate a gift card? \_\_\_yes \_\_\_ no

If yes, \$ \_\_\_\_\_

### PROMOTIONAL MATERIALS

Please estimate quantities for each Dining Out For Life® promotional materials you will use from March 20 - April 20.

Postcards / Handouts \_\_\_\_\_ Posters \_\_\_\_\_ Table Tents \_\_\_\_\_

### DINING OUT FOR LIFE® AGREEMENT

I want to participate (please check one):

- Main DOFL Day - Tuesday, April 20     I would like to discuss Saturday or Sunday options (April 17/18)

I will participate (check all that apply)

- Breakfast / Hrs \_\_\_\_\_     Lunch / Hrs \_\_\_\_\_     Dinner / Hrs \_\_\_\_\_     Brunch / Hrs \_\_\_\_\_  
 Yes, I would like to include alcohol sales in our contribution.

### DINING OPTIONS

Truck Location \_\_\_\_\_  Outdoor Seating? (Capacity \_\_\_\_\_)

### I WISH TO CONTRIBUTE

- 15%     25%     50%     \*100%     \_\_\_\_\_%

*\*Interested in participating at 100%? Contact us for promotional opportunities related to this level of participation. 100% participants will be listed as a sponsor for this year's Dining Out For Life event.*

By signing this document I confirm that I have read and agree to all Dining Out For Life® participation information as described on the opposite page and we will participate in Dining Out For Life® 2021 as outlined above.

Authorized Representative's Signature: \_\_\_\_\_ Date \_\_\_\_\_

Authorized Representative's Name & Title (please print): \_\_\_\_\_