

# Shop Local Program Business Application

May 1st - October 31st

I, \_\_\_\_\_, owner/manager of \_\_\_\_\_ will provide the selected discount below to any and all persons who present my company with the Shop Local Card or App from May 1st 2018 through October 31st 2018.

- 10%                       15%                       20%                       25%

The **Specialty Discount** category is ONLY available for companies who are legally, or by the policies of their corporation, unable to provide a blanket discount.

I would like to provide a **Specialty Discount** because my company is prohibited from providing a blanket discount. (Describe your Specialty Discount ) \_\_\_\_\_

The card defines that the Shop Local discount is not combinable with any other offers or promotions. You agree to display the Shop Local discount sticker in a conspicuous location within your business for the duration of the program and will remove the sticker upon the program end date of October 31st. **You understand that failure to honor the agreed discount will result in immediate removal from the Shop Local Program and all promotional materials.**

Along with the discount agreed upon above, your business will have the opportunity to be the “**Featured Business of the Week**” and/or to host a “**Lunch mob**” by increasing your existing discount by an additional 10% for one week only. During that time we will feature your business in partner newspapers, the Chamber website/calendar of events, social media, our Visitor’s Center, and our weekly e-mail to all cardholders. This will provide your business with additional exposure and motivate consumers to shop at your business due to the increased discount.

I would like to host a **Lunch Mob** and agree to increase my discount by 10% during my Featured Week for one week only to get additional promotion. Dates in Red are reserved for Restaurants.

I would like to be a **Featured Business** of the Week and agree to increase my discount by 10% during my Featured Week for one week only to get additional promotion. Dates in Black are reserved for non-restaurants.

My Featured Week will be: (Date must be approved by Director of Events, Allyson Dunn)

- |                                    |                                    |                                     |                                      |                                      |                                    |                                    |
|------------------------------------|------------------------------------|-------------------------------------|--------------------------------------|--------------------------------------|------------------------------------|------------------------------------|
| <input type="checkbox"/> 5/1-5/7   | <input type="checkbox"/> 5/8-5/14  | <input type="checkbox"/> 5/15-5/21  | <input type="checkbox"/> 5/22-5/28   | <input type="checkbox"/> 5/29-6/4    | <input type="checkbox"/> 6/5-6/11  | <input type="checkbox"/> 6/12-6/18 |
| <input type="checkbox"/> 6/19-6-25 | <input type="checkbox"/> 6/26-7/2  | <input type="checkbox"/> 7/3-7/9    | <input type="checkbox"/> 7/10-7/16   | <input type="checkbox"/> 7/17-7/23   | <input type="checkbox"/> 7/24-7/30 | <input type="checkbox"/> 7/31-8/6  |
| <input type="checkbox"/> 8/7-8/13  | <input type="checkbox"/> 8/14-8/20 | <input type="checkbox"/> 8/21-8/27  | <input type="checkbox"/> 8/28-9/3    | <input type="checkbox"/> 9/4-9/10    | <input type="checkbox"/> 9/11-9/17 | <input type="checkbox"/> 9/18-9/24 |
| <input type="checkbox"/> 9/25-10/1 | <input type="checkbox"/> 10/2-10/8 | <input type="checkbox"/> 10/9-10/15 | <input type="checkbox"/> 10/16-10/22 | <input type="checkbox"/> 10/23-10/29 |                                    |                                    |

I am interested in learning more about the additional promotional opportunities that come with offering a discount to CHAMBER MEMBERS ONLY year round.

\_\_\_\_\_  
Member’s Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Direct Contact Number

\_\_\_\_\_  
Business Email

\_\_\_\_\_  
Business Phone Number

\_\_\_\_\_  
AJ Chamber Representative Signature

\_\_\_\_\_  
Date