

Participation Form

estaurant Address:			
ity:	State/Province:	Zip/Postal Code	:
lebsite:	Telephone: ()	Fax: () _	
mail:	Facebook:		
articipation Require	ements:		
	d VI business license		
_	pation deadline of May 20, 2016		
DOT to provide aInclude locally soThree course meAgree to submit	ribution of \$35 in the form of a gift certifical branded template for DINE VI menu. Durced products and or traditional cuisine or traditi	n the menu as much as possi , and Dessert ust 31, 2016. <i>All RESTAURA</i>	ble
DineVI: USVI Restaura	PLY: ant Week - October 27, 2016 – November 12	2 2016	7 No
Diric VI. GGVI Nestadia	int veck - October 27, 2010 – November 12	2, 2016. YES	□ No□
Offer Lunch Special \$1	5 max.	YES [] No
Offer Lunch Special \$20 max.		YES [] No
3 Course 3 Option Dinr	ner \$35	YES] No
3 Course 3 Option Dinr		YES_	
3 Course 3 Option Dinr		Yes] No
3 Course 3 Option Dinr	ner \$49 nore about Open Tables Reservation Servic	YES	No No
3 Course 3 Option Dinr	ner \$49 nore about Open Tables Reservation Servic food on menu	YES YES	No No
3 Course 3 Option Dinn Interested in learning multiple Include locally sourced Include traditional cuisi	ner \$49 nore about Open Tables Reservation Service food on menu ne on menu n I agree that my restaurant will be partice	YES YES YES	No No No Restaurant
3 Course 3 Option Dinr Interested in learning m Include locally sourced Include traditional cuisi By submitting this form Restaurant official cont	ner \$49 nore about Open Tables Reservation Service food on menu ne on menu	YES YES YES	No No No Restaurant
3 Course 3 Option Dinr Interested in learning m Include locally sourced Include traditional cuisi By submitting this form Restaurant official contionly)	ner \$49 nore about Open Tables Reservation Service food on menu ne on menu n I agree that my restaurant will be partice	YES YES YES YES YES YES	No No No Restaurant

St. Croix: caluis@usvitourism.vi and St. John and St. Thomas: ccjohn@usvitourism.vi).**