



Savor Massachusetts Restaurant Participation Agreement

This agreement is for Massachusetts restaurants or cafés that make a significant effort to purchase and promote locally grown food products and would like to become a ***Savor Massachusetts*** participant.

The Massachusetts Department of Agricultural Resources (MDAR) Culinary Tourism Program, ***Savor Massachusetts*** welcomes the opportunity to promote restaurants who support Massachusetts farms and food producers. If you would like your restaurant to be included as a web-resource for the “culinary traveler” the following criteria must be met and a signed participation agreement is required.

Savor Massachusetts Restaurant Criteria (at least two must be met):

- 1) Provide a list of at least three Massachusetts farms and/or food/wine producers you purchase from on a regular basis either directly or through a distributor.
- 2) Provide seasonal menus (2 – 4/year) that promote the farm product whenever possible.
- 3) Perform consumer outreach and education through special farm-to-table menus, dining events or culinary festival participation.

As a ***Savor Massachusetts*** participant you will receive:

- A listing on the *Savor Massachusetts* website, www.mass.gov/massgrown
- Use of the ***Savor Massachusetts*** logo (subject to additional terms and conditions)
- An opportunity to have your restaurant events listed on our monthly culinary calendar
- Opportunity to submit a seasonal monthly recipe to be featured on the website

Restaurant Name: _____

Restaurant Contact: _____

Address: _____

City: _____ County: _____ Zip Code: _____

Phone Number: _____

Email: _____

Restaurant Website: _____

Savor Massachusetts Restaurant Criteria (at least two must be met):

- 1) Provide a list of at least three Massachusetts farms and/or food/wine producers you purchase from on a regular basis either directly or through a distributor:

- 2) Provide seasonal menus (2 – 4/year) that promote the farm product whenever possible. (attach samples)
- 3) Perform consumer outreach and education through special farm-to-table menus, dining events or culinary festival participation. (list past or upcoming events, or provide samples of menus, promotional materials, etc)

By signing this **Savor Massachusetts Restaurant Participation Agreement**, I have read and understand the obligations of participation. I have included the necessary **Restaurant Criteria Documentation**.

Owner's signature/Date:

Printed Name: _____

Culinary Tourism Coordinator's Signature/Date:

Printed Name: _____

Return this agreement (no faxes please) to:
Attn: Culinary Tourism Coordinator, MDAR
251 Causeway St., Suite 500
Boston, MA 02114

A signed copy of the agreement will be returned to you.