



**POCONO MOUNTAINS  
RESTAURANT MONTH**

*Taste of the Poconos*

**April 13 to May 8, 2020**



## **RESTAURANT SPONSORSHIP PACKAGES**

**Expand Your Reach and Showcase Your Restaurant to Thousands of Potential Customers in the Poconos and Surrounding Regions.**

**[PoconoRestaurantMonth.com](http://PoconoRestaurantMonth.com)  
[DiscoverCarbonPA.com](http://DiscoverCarbonPA.com)**





# Taste of the Poconos

April 13 to May 8, 2020

Dear Restaurant Owners,

The Pocono Mountains Visitors Bureau (PMVB) and the Carbon Chamber & Economic Development Corporation (CCEDC) are teaming up again for the **2020 Pocono Mountains Restaurant Month "Taste of the Poconos"** Campaign. The goal is to grow participation from more restaurants and expand our messaging through this partnership encompassing the four counties of the Pocono Mountains: Wayne, Pike, Monroe and Carbon in northeastern Pennsylvania.

### **The partnership will bring more awareness to participating restaurants:**

The Carbon Chamber & Economic Development Corporation (CCEDC) will not only be promoting your restaurant and **Pocono Mountains Restaurant Month** on a county level, but the PMVB will also provide additional media spending and promotional ties to support **Pocono Mountains Restaurant Month** on a regional level. Advertising will be comprised of numerous mediums and formats: at the outset, a mix of television, digital, and social. The campaign will flight approximately eight weeks starting the week of March 9th. This affords all participating restaurants prime and expanded exposure throughout the Poconos and surrounding regions.

### **So, how can you participate in all the excitement of Pocono Mountains Restaurant Month - "Taste of the Poconos?"**

Simply by being a member of the PMVB or CCEDC, you are eligible to participate. If you would like to learn about sponsorship opportunities, please review the detailed sponsorship packages on the pages to follow, select the sponsorship package which aligns with your budget and follow the instructions on page 4.

Deadline to participate and for all advertising materials is **WEDNESDAY, FEBRUARY 19TH.**

**PLEASE NOTE:** If your restaurant is a member of either the PMVB or CCEDC, you are eligible to be a participating restaurant in **Pocono Mountains Restaurant Month "Taste of the Poconos."** If you're interested in purchasing a restaurant month sponsorship package, please return the sponsorship form below. If you're not a member and would like to participate in **Pocono Mountains Restaurant Month**, please fill out either the PMVB or the CCEDC Membership Application Form included with this packet.

We look forward to partnering with you this year, so that TOGETHER, we can showcase your business to thousands of new customers!

Thank you,

**The Pocono Mountains Visitors Bureau and the Carbon Chamber & Economic Development Corporation**



- All Participating Restaurants Will Receive a **Pocono Mountains Restaurant Month Tool Kit**
  - Includes: Menu Template with menu added to template for you
  - Social Media Templates, Graphics and tags
  - Email Newsletter graphic and information
  - PR Templates and information

**Basic Participation Package: \$100 in the form of (2) \$50 Restaurant Gifts Cards or (4) \$25 Restaurant Gift Cards if you're a member of the PMVB or the CCEDC. These will be used as donations, so that we can use them for social media contests and other promotions. *The gift cards will not be valid during Pocono Mountains Restaurant Month; these will be used to promote additional visits to your restaurants.***

- Text link on **PoconoRestaurantMonth.com** with a link to your restaurant's listing (for PMVB Members) or link to your restaurant's website (non-PMVB members).

## Sponsorship Packages Available:

### 1. Silver Spoon Sponsor: \$400.00 and (2) \$50 Restaurant Gift Cards Donation (A \$3,000+ Value)

- Placement on **PoconoRestaurantMonth.com** and on all advertising mediums listed below. This may include and not limited to:
  - Digital and social advertising will drive traffic to PoconoRestaurantMonth.com where your listing is located
  - Mentions on Email Blasts
- "Third Tier Location" PMVB Restaurant Listing on **PoconoRestaurantMonth.com** and your respective Chamber's landing page. *(This listing may include: restaurant name, contact info, link to restaurant website, downloadable menu in PDF format.)*

### 2. Gold Fork Sponsor: \$600.00 and (3) \$50 Restaurant Gift Cards Donation (A \$4,000+ Value)

- Placement on **PoconoRestaurantMonth.com** and on all advertising mediums listed below. This may include and not limited to:
  - One paid ad on Pocono Tourism Facebook page
  - Digital and social advertising will drive traffic to PoconoRestaurantMonth.com where your premium placed listing is located
  - Mentions on Email Blasts
  - If not a PMVB member: One year of membership as a PMVB Restaurant Member
- "Second Tier Location" PMVB Restaurant Listing on **PoconoRestaurantMonth.com** and your respective Chamber's landing page. *(This listing may include: restaurant name, contact info, link to restaurant website, downloadable menu in PDF format.)*

### 3. Platinum Plate Sponsor: \$1,000.00 and (4) \$50 Restaurant Gift Cards Donation (A \$6,000+ Value)

- Premium placement on **PoconoRestaurantMonth.com** and on all advertising mediums listed below.  
This may include and not limited to:
  - Mentions or tags on Restaurant Month TV spots\*
  - Canvas Ad on Pocono Tourism Facebook page (with a potential reach of up to 150,000 impressions)\*
  - One Instagram Story on Pocono Tourism IG page (with a potential reach of up to 40,000 impressions)\*
  - Digital and social advertising will drive traffic to PoconoRestaurantMonth.com where your premium placed listing is located
  - Mentions on Email Blasts
  - If not a PMVB member: One year of membership as PMVB Restaurant Member
- “First Tier location” PMVB Restaurant Listing on **PoconoRestaurantMonth.com** and your respective Chamber’s landing page. *(This listing may include: restaurant name, contact info, YouTube link to spotlight video, link to restaurant website, downloadable menu in PDF format.)*
- 3-minute Business Spotlight Video that will showcase your business (for one business). Video can be used to promote your business for Restaurant Month, or you can schedule the video to be used to showcase your business throughout the year.

*\* Mentions or tags will be determined once buy is placed, rotation of names will also depend on the number of Platinum sponsors.*

### Participating Restaurant Material Due Date:

- **February 19, 2020**
  - Participation forms, restaurant logo and website link
  - Gift cards and Chamber membership payments (if new application) are due to your Chamber and sponsorship package payments are due to the PMVB in order to receive all sponsorship benefits and allow for time to get your restaurant information on the website.
  - Menus due to the PMVB
    - Menus are to be “Prix Fixe” in the following format and can be for either lunch and/or dinner
      - Appetizer, Entrée and Dessert





## How to Order Your Sponsorship Package

### **DEADLINE FOR PARTICIPATION & SUBMISSION OF REQUESTED MATERIALS IS FEBRUARY 19, 2020**

- Once you have reviewed the available sponsorship packages, please complete the provided form ***in its entirety***. Email your completed form, your hi-resolution logo (300 dpi), **and your Restaurant Month Menu (unformatted) in a Word document or in the body of your email** to the Chamber representative listed at the bottom of this form.

**PLEASE NOTE that your Chamber will insert your menu into a Pocono Mountains Restaurant Month template and provide you with a PDF of your formatted menu. We ask that you print and distribute this menu to your customers during Restaurant Month.**

- Gift Card Donations are to be either mailed or dropped off to the **CCEDC, 137 South Street, Lehighton, PA 18235**
- Your Chamber representative will then contact you to confirm receipt of your sponsorship package order. For sponsorship, you will receive an invoice from the Pocono Mountains Visitors Bureau. For Chamber membership (if applicable), you will receive an invoice from your Chamber.

**VERY IMPORTANT: Please be sure to designate a Restaurant Month Point of Contact for your restaurant and have him/her utilize your Pocono Mountains Restaurant Month Toolkit. Be sure to have your staff promote Restaurant Month to your customers as well as promote on your website and social media pages.**

**Questions:** Please contact your Carbon Chamber representative:

**Dina Tulli Davis**

**CCEDC Director of Marketing & Communications**

**JumpSpark Creative Group, LLC.**

**570-722-3751**

**dina@jumpsparkcreative.com**



## “Taste of the Poconos” Restaurant Sponsorship Form

**DEADLINE FOR PARTICIPATION & SUBMISSION OF REQUESTED MATERIALS IS FEBRUARY 19, 2020**

Selected Sponsorship Package: \_\_\_\_\_

Restaurant Name: \_\_\_\_\_

Restaurant Address: \_\_\_\_\_

\_\_\_\_\_

Billing Address: \_\_\_\_\_

\_\_\_\_\_

Restaurant Telephone Number: \_\_\_\_\_

Restaurant Website or URL Link to Your Menu Webpage: \_\_\_\_\_

Your Restaurant Month Point of Contact Name: \_\_\_\_\_

Your Restaurant Month Point of Contact Best Phone Number: \_\_\_\_\_

Your Restaurant Month Point of Contact E-mail Address: \_\_\_\_\_

**PLEASE NOTE:** Your restaurant must be a member of either the PMVB or the CCEDC in order to participate in **Pocono Mountains Restaurant Month “Taste of the Poconos.”** If you’re interested in purchasing a restaurant month sponsorship package, please return this sponsorship form to your Chamber Representative. If you’re not a member and would like to participate in Pocono Mountains Restaurant Month, please fill out and return either the PMVB or the CCEDC Membership Application Form included with this packet.

# POCONO MOUNTAINS VACATION BUREAU, INC. MEMBERSHIP AGREEMENT

This agreement made this \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_ by and between the Pocono Mountains Vacation Bureau, Inc. (PMVB) and the undersigned individual, sole proprietor, partnership, or corporation (member) witnessed:

That in consideration of \_\_\_\_\_ dollars payable to the PMVB as hereinafter provided, member is hereby granted full membership in the PMVB and is thereby accorded all rights and privileges of such membership as set forth in the bylaws of the PMVB for fiscal year July 1 - June 30, \_\_\_\_\_.




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**Registered Trade Name**

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**Local Business Address** **City** **State** **Zip**

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**Business Telephone**

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**Signature: \*Owner (Corporate Officer, Partnership, or Individual)**

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**Owner's Address** **City** **State** **Zip**

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**Owner's Telephone**



**POCONO MOUNTAINS<sup>SM</sup>**

**Pocono Mountains Vacation Bureau, Inc.**

1004 W. Main Street Stroudsburg, PA 18360 • Phone: 570-421-5791 | Fax: 570-421-6927

**PoconoMountains.com**

**Complete this form and return it to [membership@poconos.org](mailto:membership@poconos.org)**

# NEW MEMBER INFORMATION SHEET

Welcome to the Pocono Mountains Visitors Bureau! Thank you for choosing the PMVB as a partner in promoting your business. In order to better serve you, please take a moment to provide us with some vital information. The information on this sheet will be used for our internal use to let our Information Specialists know what you do and where you are located as well as let our office staff know who to contact with questions.

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**Property Name**

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**Physical Address**

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**Mailing Address**

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**Phone Number**

**Fax Number**

---

**Email**

---

**Website**

---

**Primary Contact**

**Position/Title**

**Email**

---

**Billing Contact**

**Position/Title**

**Email**

---

**Advertising Contact**

**Position/Title**

**Email**

---

**Website Contact**

**Position/Title**

**Email**

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**Sales Contact**

**Position/Title**

**Email**

**Introduction/Description of Your Business** - Please provide us with both an introduction and full description of your business, which we can use in our monthly newsletter and your listing on our site. For example: "A quaint bed & breakfast, open year-round, situated on 10 acres. Eight guest rooms with private baths overlooking Delaware Water Gap." Continue on back of page if necessary.

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**Introduction (250 characters or less):**

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**Full Description (750 characters or less):**

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**Name of Person Completing This Form**

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**Title**

**Date**

Thank you! We look forward to meeting you at one of the many PMVB events!



**POCONO MOUNTAINS<sup>SM</sup>**

**Pocono Mountains Vacation Bureau, Inc.**

1004 W. Main Street Stroudsburg, PA 18360 • Phone: 570-421-5791 | Fax: 570-421-6927

**PoconoMountains.com**

**Complete this form and return it to [membership@poconos.org](mailto:membership@poconos.org)**





## **Membership Application Information**

Date: \_\_\_\_\_

Company/Organization Name: \_\_\_\_\_

Primary Contact Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Business Telephone: \_\_\_\_\_ Cell/Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

Date Established: \_\_\_\_\_ If referred, by whom? : \_\_\_\_\_

Full Time Employees: \_\_\_\_\_ Part Time Employees: \_\_\_\_\_

New Business Package Requested (Membership & Grand Opening/Ribbon Cutting Event): \_\_\_\_\_

Please list all employees that benefit from receiving Chamber correspondence:

Name	E-mail	Phone	Title

*Please include additional contacts on a separate sheet*

I understand that by providing the contact information above, on behalf of the company/organization specified above, I am authorized to and hereby consent for the company/organization to receive communications sent by or on behalf of the Carbon County Chamber of Commerce.

Signature: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Primary Business Category:	
Additional Category:	
<p><b>Note:</b> For a complete list of categories, visit <a href="http://www/business.carboncountychamber.org/list/">www/business.carboncountychamber.org/list/</a>. Categories must be chosen from this list.</p>	

**Please provide a business description (200 characters):**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Please provide keywords for your membership directory listing – this can help enhance the search engine optimization of your listing:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**My business’ primary interests in The Chamber are (check all that apply):**

- |  |  |
|--|--|
| <input type="checkbox"/> Signature Events              | <input type="checkbox"/> Volunteer Committee         |
| <input type="checkbox"/> Membership                    | <input type="checkbox"/> Leadership Carbon           |
| <input type="checkbox"/> Sponsorship                   | <input type="checkbox"/> Women in Business Council   |
| <input type="checkbox"/> Professional Development      | <input type="checkbox"/> Marketing & Promotion       |
| <input type="checkbox"/> Grand Opening Host/Mixer Host | <input type="checkbox"/> Public Policy               |
| <input type="checkbox"/> Tourism & Accommodations      | <input type="checkbox"/> Young Professionals Council |

**I heard about The Chamber through:**

- |  |  |
|--|--|
| <input type="checkbox"/> Chamber Member: _____ | <input type="checkbox"/> Website           |
| <input type="checkbox"/> Newspaper             | <input type="checkbox"/> Television        |
| <input type="checkbox"/> Radio                 | <input type="checkbox"/> Attended an Event |
| <input type="checkbox"/> Billboard             | <input type="checkbox"/> Broker            |
|  | <input type="checkbox"/> Other: _____      |

<b>Marketing Contact:</b>	
<b>Accounting Contact:</b>	
<b>Company Facebook:</b>	
<b>Company LinkedIn:</b>	
<b>Company Twitter:</b>	

Help us ensure the accuracy of your information by completing this form and emailing this form to AliceW@CarbonCountyChamber.org. **Please return this form ASAP to ensure that your company’s information is updated for the annual printed Membership Directory.** Verification form updates generally take 2 – 4 weeks to process. Return the Membership Verification Form along with a business card for you and your employees to: **Carbon Chamber & Economic Development Corporation - 137 South Street, Lehigh, PA 18235.**

\_\_\_\_\_(initial) I grant to Carbon Chamber & Economic Development and the Greater Lehigh Valley Chamber of Commerce (CCEDC and GLVCC), its representatives and employees the right to take photographs of me and my property. I authorize CCEDC and GLVCC, its assigns and transferees to copyright, use and publish the same in print and/or electronically. I agree that the CCEDC and GLVCC and affiliated partners may use photographs and videos of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_