

## Show Your Library Card and Save!

### *Business Agreement*

Business Name: \_\_\_\_\_

General Description of Business: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Business License Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Manager / Owner Contact Name: \_\_\_\_\_

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

Discount / Perk you will offer library cardholders: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I, the undersigned, agree to offer the aforementioned perk or discount to C.H. Booth Library Cardholders, possessing either physical or virtual library cards, from April 1 date until June 30 otherwise noted in writing to the C.H. Booth Library. I also agree to display my participation in the Show Your Library Card and Save! Program by displaying the decal provided to me by the C.H. Booth Library.

In return, the C.H. Booth Library will promote my business and will advertise the aforementioned perk or discount I am offering, on the C.H. Booth Library's website, via promotional materials within the libraries (bookmarks and/or flyers), through social media such as Facebook and/or Instagram, and more.

\_\_\_\_\_

Signature

\_\_\_\_\_

Print Name

\_\_\_\_\_

Date

**Please complete this form and return it to the C.H. Booth Library at the address below or to [smerrill@chboothlibrary.org](mailto:smerrill@chboothlibrary.org). Questions? Contact Shari Merrill at (203) 426-4533 ext. 4650.**



**C. H. Booth Library**

**25 Main Street, Newtown, CT 06470**