



## **Brewery/Restaurant Participation Commitment Form**

Name of Brewery/Restaurant:

\_\_\_\_\_

*Include as you want printed in the Tasting Journal.*

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

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

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

City/State/Zip: \_\_\_\_\_

I understand that we are agreeing to provide 2 kegs (or equivalent) of our signature handcrafted microbrew.

I understand that we are providing one signature appetizer for 300 guests.

Signature: \_\_\_\_\_

**Please sign and return to:**

Supportive Housing Communities  
601 E. 5<sup>th</sup> Street, Suite 255  
Charlotte, NC 28202  
Attn: Kristina Aquilone, Director of Development  
Phone: 704-248-3793  
Email: [kristina@aplacetoliveagain.org](mailto:kristina@aplacetoliveagain.org)