



Downtown Oakland Entertainment, Dining and Cultural Venue Survey

(please type or print clearly)

Business/Establishment Name: _____

Contact Name: _____

Address: _____

Contact Phone: _____ Public Phone: _____

E-Mail: _____ Website: _____

Hours of Operation: _____

*****Please indicate which category or categories best describe your business *****

- Art Gallery Bar Night Club Performance Venue
 Restaurant Café/Coffee House Other

*****Please indicate which of the following amenities are provided by your business *****

- Full Bar Beer & Wine Only Full Kitchen (type of cuisine served) _____
 Bar Food/Appetizers only Live Performances (provide cabaret license #) _____
 DJ Juke Box Dancing Karaoke Other _____

Please provide a one-line description of your business to be included in the marketing materials:

Has your establishment received any **accolades, awards** or **recent press coverage** that we can mention in the marketing materials? If so, please describe: (if necessary, attach additional sheets and/or attach copies)

Which credit cards does your establishment accept?

- Master Card Visa Discover American Express ATM/Debit
Other _____

Thank you for completing this survey. The information you provide is subject to editing based on space and content constraints.

Please return as soon as possible.

Fax to: 510-238-6341 or mail to: Harry Hamilton, Marketing Division, City of Oakland, 1 Frank Ogawa Plaza, 9th Floor, Oakland CA 94612.