



# 2019 RESTAURANT/FOOD EXHIBITOR APPLICATION FORM

**You are invited to showcase your business at the 16th Annual Taste of Fountain Valley!**

**SATURDAY, APRIL 6 2019 • 5:30-9:00 PM**

Los Cab Sports Village, 17272 Newhope St, Fountain Valley, CA 92708

Restaurant/Company Name: \_\_\_\_\_

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

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

Business Location/Address: \_\_\_\_\_

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

Description of Food Samples: \_\_\_\_\_

### **Restaurant/Food Exhibitors Requirements:**

- A total of 600 small (1-2 oz.) samples; these samples can be up to 3 different foods.
- A tablecloth, decorations and any other branding and marketing materials you would like to distribute.
- Tasting plate/bowl/cup and plastic ware if needed.
- An EZ-Up (pop up tent) and a hand cart for set up assistance is highly recommended.
- A gift card/gift certificate donation of no less than \$25 for our silent auction is to be submitted by no later than Saturday, March 23.
- An agreement to hang TOFV Poster at your place of business to help advertise the event and help promote the event on your social media platforms.
- Exhibitors must be set up by 4:45pm and must maintain presence in booth space until 9:00pm

### **The Taste of Fountain Valley will provide:**

- Company logo listing on our website, social media and in the event program.
- 10 x 10 booth space with (1) 6 ft. table and 2 chairs.
- Food Exhibitors will receive (3) staff admissions. Additional staff tickets can be purchased in advance.

**I have read the Restaurant/Food Exhibitor Requirements above and commit to full participation in the 2019 Taste of Fountain Valley event on Saturday, April 6th, 2019:**

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



All proceeds benefit the Fountain Valley Schools Foundation. ID #95-3794172  
If you have any questions, please contact 714-625-7198 or email: [tasteoffv@gmail.com](mailto:tasteoffv@gmail.com)  
FAX # 714-241-1790