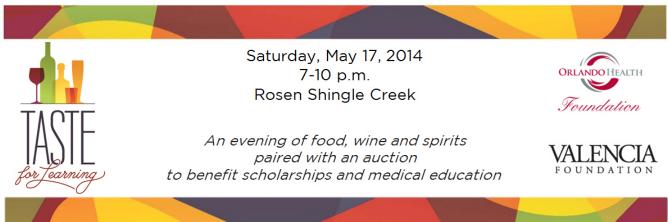
FOOD VENDOR AGREEMENT



Contact Name	Restau	rant Name			
How would you like the organization recognized in our printed		ed material?	E-mail Address of Contact		
Phone	Extension	Fax			
Address		City	State	ZIP	
What signature food items are you graciously providing?		In what quantity? (Possibly 1000-1300 attendees)			
Will you provide plates, cups, utensils?		Do you have signage? Please specify.			
How many table(s) do you require? (Based on event site availability.) Will you be bringing décor? O Yes O No		(An approx	What dimension of space (min) is needed? (An approximate area of 18x18 will be provided.) Do you have a booth for this purpose? O Yes O No		
How many representatives will you have at the booth/tables?			Will you provide linens, skirting? Do you require linens? (Quantity?)		
How many representatives wi booth/tables?	ll you have at the				

*Please note that only cassette cooking is permitted in the ballroom.

Questions? You are welcome to contact Donna Marino at 407.582.3128 THANK YOU!