

# The Taste of Rochester Application to Exhibit Downtown Rochester August 20-August 21, 2010

Thank you for your interest in exhibiting in The Taste of Rochester. We will examine applications to exhibit on a first come first serve basis.

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

Address \_\_\_\_\_ Contact \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

E-mail \_\_\_\_\_ Website \_\_\_\_\_

Menu Items (per Ticket)

1) \_\_\_\_\_ 2) \_\_\_\_\_

3) \_\_\_\_\_ 4) \_\_\_\_\_

Restaurant Booth (10 X 10)..... \$795 QTY \_\_\_\_\_

\*\*\* The Taste of Rochester also charges 15% of Gross Sales for infrastructure. Fee taken at ticket redemption.

Winery Booth (10 X 10).....\$595 QTY \_\_\_\_\_

Non-Food Vendor (10 X 10)..... \$995 QTY \_\_\_\_\_

Electric Service.....\$100/20 amp service ordered QTY \_\_\_\_\_

\*\*\* The cost for electric ordered at event \$175

TOTAL ORDER \$ \_\_\_\_\_

I/We hereby agree to abide by event terms, conditions and regulations set forth by TRG. All exhibitors understand this is a rain or shine event and agree to stay for stated hours or pay TRG a \$100 early withdrawal fee. There is no changing of exhibit locations on site except if TRG decides that a move is in the best interests of the event. TRG reserves the right to move any exhibit or exhibitor at its sole discretion for the betterment of the event. There is a 25% charge for exhibit orders cancelled between 60-90 days prior to the event. There are no refunds inside of 30 days prior to the event. Cancellations are not accepted inside of 30 days prior to the event. If you cancel or do not show up to the event, you agree that TRG still receives its contracted exhibit fee. Any invoice not paid in full by July 30, 2010 is subject to a \$25 late fee.

(REQUIRED) I have read the above & would like to exhibit in this event.

Signed \_\_\_\_\_ Print \_\_\_\_\_ Date \_\_\_\_\_

Credit Card Purchases Only:

Credit Card # \_\_\_\_\_ Name on card \_\_\_\_\_

Exp. Date \_\_\_\_\_ Sec. Code \_\_\_\_\_ Billing Zip \_\_\_\_\_

Signature \_\_\_\_\_

Mail or fax this registration: Phone (585)730-6104 Fax: (315) 426-0024

Mail: Taste of Rochester  
1201 E. Fayette St., Suite 5  
Syracuse, NY 13210

Please make check payable to:  
**The Results Group**