## **EXHIBITOR FOOD & BEVERAGE REQUEST FORM**



## Food and Beverage Request

The following information must be completed and submitted no later than two weeks prior to the event for approval.

Please submit to:	Food and Beverage	ge Operations Manager

Charlotte Convention Center 501 South College Street Charlotte, NC 28202 (704) 339-6051 - fax

(704) 339-6031 –	lax	
Company name:	Event Name:	Event Date:
Company Address:	Email:	
Phone Number:	Fax Number:	
ne following constitutes a <u>sample dist</u>	tribution request used for the so	ple purpose of distributing sample foo
d/or beverage to exhibit attendees, mples will be of individual bite-sized as and that all items are company pro	portions and that beverages will	es that all items to be distributed a be in containers of four (4) ounces of

PRODUCT NAME/ TYPE	SAMPLE SIZE	QUANTITY	√ APPROVED	√ DENIED
1)				
2)				
3)				
4)				

The following constitutes a request to be a vendor for the purpose of selling food and/or beverage to exhibit attendees.

	PRODUCT / SERVICE				
For consideration please attach the following:  Appropriate business license and insurance certificate.  Product portion size and suggested selling price.  Recent health department grading and appropriate food service certificates. (ie. ServSafe, etc.)  Pictures of product and/or food service equipment.  List of references					
Print Name (Company Representative):					
Signature (Company Representative):					
Signature (Charlotte Convention Center Representative):					
Comments:					

september 24-26 / charlotte convention center