



2010 BUSINESS



# EXPO

**HealthQuest of Hunterdon • Thursday, October 14, 2010**

## RESTAURANT APPLICATION FORM

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Years in Business: \_\_\_\_\_

I agree to provide food tastings for up to 300 people for the 2010 Business EXPO on Thursday, October 14, 2010 from 4:00 - 6:00 p.m. I understand I am responsible for providing my own serving utensils and paper products. Electricity may be contracted at my own expense. The Hunterdon County Chamber of Commerce will provide one six foot skirted table for my own use.

Name: \_\_\_\_\_

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

Date: \_\_\_\_\_ Position: \_\_\_\_\_