

HILLCREST

Taste 'N' Tinis

Thursday, December 14th 2017

4:00 pm to 9:00 pm

PARTICIPATION FORM

BUSINESS NAME: _____

ADDRESS: _____

BEST CONTACT PHONE: _____ EMAIL: _____

MANAGER/OWNER: _____

BUSINESS WEBSITE: _____

FACEBOOK: _____ INSTAGRAM: _____

I AM A RETAILER AND AGREE TO PAY \$250 AND RECEIVE A TEMPORARY ABC LICENSE, A SPECIALTY COCKTAIL RECIPE, A BARTENDER AND PROMOTIONAL MATERIALS. PAYMENT AND APPLICATION DUE NO LATER THAN NOVEMBER 20TH.

I AM A RESTAURANT AND AGREE TO SPONSOR A RETAIL LOCATION WITH A SERVER AND BAR SUPPLIES. I ALSO AGREE TO PROVIDE 500 SAMPLES THE EVENING OF THE EVENT (MAY INCLUDE COCKTAILS FEATURING EVENT LIQUOR SPONSOR).

NAME OF SERVER: _____ CONTACT INFO: _____

DESCRIPTION OF SPECIALTY SAMPLE TO BE SERVED: _____

(*Failure to meet the requirements of this agreement may lead to revoked participation on the day of the event)

YES I WOULD LIKE TO PARTICIPATE IN ANY MEDIA OPPORTUNITIES FOR TASTE N TINIS ie. RADIO ADVERTISEMENT, COOPERATIVE ADS AND TV SPOTS. (THIS IS A FIRST COME FIRST SERVE BASIS).

YES I WOULD LIKE TO SELL TICKETS FOR TASTE N TINIS.

YES I WOULD LIKE TO PROVIDE A COUPON FOR TASTE N TINIS.

SIGNATURE OF MANAGER/OWNER: _____

Please fax, email or drop off this application form to the Hillcrest Business Association at

P: 619-299-3330 F: 619 299 4230 E: Benjamin@HillcrestBia.org

Address: 3737 5th Ave. Ste 202 Fifth Ave. San Diego, CA 92103