



2014 Restaurant Application

Please complete this form and return it with required documents and fees, as indicated below, by **May 5th, 2014**. No menu exclusives will be granted. Those with unique signature cuisine will be given first consideration in menu selection. Acceptance letters will be sent the week of May 12th, 2014 with approved menu. Please fill out your preferred menu. You may offer up to 6 food choices and 6 beverage choices which may be alcoholic or non-alcoholic depending upon your current liquor license status. Fixed pricing on like-size branded wine, beer, alcohol, branded soda and bottled water will be in effect, please fill out your suggested retail price for review.

Please return your completed application by May 5 to:

**Amdur Productions
PO Box 550
Highland Park, IL 60035**

Please include TWO SEPERATE CHECKS with your application as follows:

Checks will not be deposited until vendor selection is completed. Vendors not selected to participate in the 2014 Taste will be sent their deposit checks along with their notification letter.

1. A check made payable to Amdur Productions in the amount of \$975 for:

- 1 - 10' x 10' Fire Retardant Tent
- 1 - Front Counter
- 1 - Overhead Work Light
- 1 - Restaurant Name Banner
- 1 - Customized Menu Board
- 2 - 8' Prep Tables
- 2 - Chairs
- 2 - 20 Amp Electric Circuits to your Booth
- 1 - Vendor Trash Receptacle
- 1 - Shared Hand Wash Sinks
- "Super H" Style Sign Poles for Banner Placement
- Booth Installation, Weighting, and Removal
- Electricity from Set-Up to Breakdown of the Event
- Use of Shared Refrigerator Truck
- Hot Charcoal Removal
- Covered Common Area Tables and Chairs with Umbrellas
- Common Area Janitorial & Waste Removal
- Overnight Security
- Continuous Live Entertainment on the Main Stage
- Event Promotion

2. A check made payable to Amdur Productions in the amount of \$200 for security deposit, to be refunded after the festival if your area is left in good condition



2014 Taste of Highland Park Application

Business Name: _____

Contact: _____

Address: _____

City/State/Zip: _____

Telephone: _____ **Cell:** _____

Fax: _____ **E-Mail:** _____

Preferred Menu

Please indicate if any of your offerings are the following: Gluten Free (GF); Heart Healthy (HH); Vegetarian/Vegan (V)

Food	Portion Size	Retail Price (\$3-\$7 suggested)
1. _____	Mini Taste "Buck Bite"	\$ \$1
2. _____	_____	\$ _____
3. _____	_____	\$ _____
4. _____	_____	\$ _____
5. _____	_____	\$ _____
6. _____	_____	\$ _____

(Please list beverages on the back)



Beverage	Portion Size	Retail Price
1. _____	_____	\$ _____
2. _____	_____	\$ _____
3. _____	_____	\$ _____
4. _____	_____	\$ _____
5. _____	_____	\$ _____
6. _____	_____	\$ _____

Submit your completed application with a check for your \$975 participation fee and a check for your refundable \$200 security deposit to the address below BY MONDAY, May 5th. Both checks should be made payable to Amdur Productions.

Amdur Productions
PO BOX 550
Highland Park, IL 60035

Questions? Contact Amdur Productions at (847) 926-4300

Notifications of acceptance will be mailed the week of May 12th.

Save the Date!



Mandatory Taste Food Vendor Information Meeting

Wednesday, June 4 at 3pm
2115 Greenbay Road, Highland Park