



11th Annual Taste of MetroWest
Monday, April 29, 2024
Food & Beverage Exhibitor Participation Application
The Verve Hotel, A Tapestry Collection by Hilton
1360 Worcester Street
Natick

To reserve your booth please complete this form and attach all required paperwork and payment to reserve your booth for the event. Please read paperwork and return instructions carefully.

PLEASE RETURN APPLICATIONS AND HEALTH FORM NO LATER THAN APRIL 1, 2024!

*****Early-Bird Special: The first 10 exhibitors to submit all paperwork and payment will secure booth space in the main ballroom at the event*****

Contact Information

Name of Restaurant: _____

Restaurant Contact Name: _____

Address: _____

City/State/Zip: _____

Email: _____

Website: _____

Electricity Needed: Yes No

*Vendors must provide their own power strips.

Additional Table Needed: Yes **\$35 additional charge** No

*Please note that single booth space is 8' wide by 6' deep

Select all that apply... you may compete in more than one category but enter only one item per category!

Presentation (Given to booth with most creative booth display/ food presentation)

Beverage item: _____

Appetizer item: _____

Dessert item: _____

Entrée item: _____

***** All Exhibitors will be judged for "Best Presentation"**

REQUIRED PAPERWORK

Return all required Board of Health paperwork & payment by email to (towma@metrowest.org) or by standard mail to Towma Rastad, MetroWest Chamber of Commerce (860 Worcester Road Framingham, MA 01702)

Temporary Board of Health Permit (Fill-out Attached Document)

Board of Health Permit fee: **\$20 fee** (Payment must be submitted no later than April 1, 2024 in order to participate in the event)

Certificate of Insurance

You can have your insurance agent email a copy (or you can send yourself) to towma@metrowest.org .

Food Establishment, Food Service License, Caterers License, etc. (whichever is applicable)

Copy will be attached to this application

Food Safety Certificate of Serve Safe Certificate

Copy will be attached to this application

Allergy Awareness Certificate

Copy will be attached to this application

Most recent inspection report from the local Board of Health or State Health Department

Copy will be attached to this application

- **Participation Fees**

- Board of Health Fee - **\$20**
- Chamber Member Booth – **FREE**
- Non-Chamber Member Booth - **\$150**
- Double-Booth - **\$150 Additional** for Members & Non-Members
- Extra Table - **\$35**

Cancellation Fee

\$75* *This fee will only be charged in the event you withdraw from the Taste **after** April, 14*

- **Payment:**

- Check (attached)
- Credit Card (Please call Towma Rastad, 508-879-5600 to process)

** Please make all checks payable to MetroWest Chamber of Commerce.