3RD ANNUAL CARE FOR A TASTE **EXHIBITOR FORM**

Restaurant Name:	
Restaurant Address:	
Phone Number:	Email:
DAY OF EVENT CONTACT I	NFORMATION
Name:	Phone:
Email:	
TO HELP US BEST SHOWO THE FOLLOWING	CASE YOUR FOOD, PLEASE PROVIDE RESPONSES TO
My booth will requir	e electricity (availability is limited)
# of staff I will have	on-site that will need event access
CARE of SEM will provide (1) 8ft table with linen. Please indicate if you would like an additional table for prep. (limited quantity available)	
We'll attend and set	rt of the Delicious Dessert Display! t up our desserts desserts, but will not stay
CARE for a Taste will have valued at \$	e a raffle YES I'd like to contribute a gift card
YOUR RESPONSIBILITIES	
review all menu items pr tastings must be fully pr	de enough tastings for 300 people. CARE of SEM will ior to the event to ensure a diverse selection. The epared before arriving. You're responsible for your elements, ice, garbage containers, and staff. Set up of.
OUR RESPONSIBLITIES	
We provide you with:	

Plates, silverware, cups, napkins, linens and tables. We provide a fun and energetic atmosphere, full of people who love fun food who support a great cause. In our third year, we're looking to have the best tasting yet!

_____ DATE____

Please return the completed registration form to CARE by April 5th. You can email to Kara Conger, Development Coordinator at kconger@careofsem.com



OF SOUTHEASTERN MICHIGAN WWW.CAREOFSEM.COM 31900 UTICA ROAD, FRASER, MI 48026 586.541.CARE



A delicious event to thank and recognize our community supporters.

REGISTRATION DEADLINE FRIDAY, APRIL 5TH

SAVE THE DATE!

TUESDAY, APRIL 30, 2019 6-9:00 P.M. **GM HERITAGE CENTER** 6400 Center Drive Sterling Heights, MI 48312

PRESENTED BY OUR **CORPORATE PARTNERS**







BENEFITING

CARE'S MANY PROGRAMS AND RESOURCES THAT SUPPORT THEIR MISSION IN HELPING INDIVIDUALS LIVE HEALTHY, SUBSTANCE FREE LIVES.