



VENDOR REGISTRATION

Registration Deadline: JULY 31, 2016

Please list names as they appear on photo IDs.

Business Name: _____

Business Address: _____

Contact Person: _____

Booth Assistant(s): _____

Contact Phone #: _____

Cell #: _____

Contact Email: _____

Website: _____

_____ Yes, I allow use of our website as a link from the TOHR website.

Product(s):

I will have product(s) to: *(check all that apply)*

_____ Display

_____ Sample (1,000 1-oz. portions)

_____ Donate to chefs for use in their dishes

_____ I will bring my own compostable containers for distributing food samples.

_____ I will need to purchase compostable containers through TOHR.

Product(s) Description: _____

Hand Washing Station: *(if serving food samples for consumption)*

Can you provide your own? _____ Yes _____ No

If not, check all that you **can provide** and TOHR will provide the rest:

_____ Hand Soap

_____ Towels

_____ Water Tub

_____ 10-Gallon Water Jug

Special Requests:

_____ Electrical Outlet (110v)

- Electrical needs will be prioritized upon vendor needs.
- Vendors must provide their own extension cord.

_____ Other: _____

Send Vendor Registration Form to: _____

Taste of the Hawaiian Range

Attn: Jill Beaton

P.O. Box 447

Paauiilo, Hawaii 96776

TEL: (808)937-0314/(808)885-6602 ext 102 FAX:(808)443-0342

tasteexhibitors@gmail.com