

8th Annual Santa Cruz Chocolate Festival
Sunday, January 18, 2015 from 1 to 4 PM at the Coconut Grove

VENDOR PARTICIPATION FORM

***** Please return your completed form and by December 4, 2014 *****

1. Business Name: _____

2. Contact Name: _____ 3. Phone: _____

4. Email address: _____

5. Mailing Address: _____

6. **Staffing (check one box).** We anticipate that you will provide at least two people to staff your table. However, if you need volunteer assistance, please let us know below.

I will staff my table OR I request one volunteer to assist at our table

7. **Electricity (check one box)**

I do need electricity OR I do not need electricity

8. **Product Sales (check one box)**

I will sell product/gift certificates OR I will not sell product/gift certificates
 I request a second 6' table for \$40.00; check to be made out to UCSC Foundation

8a. Seller's permit number, **required to sell at this event:** _____

***** PLEASE ATTACH A COPY OF YOUR SELLER'S PERMIT; WE MUST HAVE THIS ON FILE*****

9. Please list general description of product(s) that you will offer for sampling at the event AND the total number of tastings:

10. Information as you would like it to appear in the Chocolate Festival program:

Company Name, along with your City, State

Web address

11. **OPTIONAL:** We will be holding a silent auction. We welcome your donation with our thanks!

11.a. Please read, fill out and return the Silent Auction Donation form if donating an item

12. Donor's Signature: _____ 13. Date: _____

Please type your name if submitting this form by e-mail or add electronic signature if you have one.

Please return completed form (and \$40.00 if wanting a second table) by Dec. 4:

(1) By mail: Ann Berry-Kline
9119 Soquel Drive
Aptos, CA 95003

OR (2) Fax to: Ann Berry-Kline
Bailey Properties
fax #: 831-685-6422