

SEVIERVILLE CONVENTION CENTER 202 GISTS CREEK RD **TELEPHONE: (865)868-1514** FAX (865)868-1519

AUTHORIZATION REQUEST SAMPLE FOOD AND/OR BEVERGE DISTRIBUTION

Spectra Food Services has exclusive food and beverage distribution rights within the Sevierville Convention Center.

Even sponsoring organizations and/or their exhibitors may distribute sample food and/or beverage products *only* upon written authorization.

Sevierville Convention Center exhibitors may distribute Food & Beverage samples in authorized space and must not be in competition with products or services offered by Spectra Food Services. Samples must be representative of products manufactured or sold by the company exhibiting. Free samples are limited to 2 ounces of non-alcoholic beverages and 1 ounce of food. Exact descriptions of sample and portion size must be submitted to the Food and Beverage Office for written approval 14 days prior to the opening of the event. No alcoholic samples may be distributed. Any exhibitor giving away and/or selling food in their booth must have a permit and all appropriate fees on file with the Tennessee Department of Health.

GENERAL CONDITIONS:

- Items dispensed are limited to products manufactured, processed or distributed by exhibiting firm. *
- ••• All items are limited to **sample size.**
 - Beverages limited to maximum 4oz. container. ٠

Size of portion to be dispensed ______

- Food items limited to "bite size" or 2oz. ٠
- Food and/or beverage items used as traffic promoters (i.e. popcorn, coffee, bar services) **must** be purchased ٠ from Spectra Food Services.

Product(s) you wish to dispense _____

Proposed method of dispensing ____

Please explain purpose of offering samples ____

SERVICE(S) REQUIRED

_____ Dry Storage - \$25.00 (per day) or _____ Pallet - \$150.00 (per day) __ Freezer/ Refrigerator - \$40.00 (per day) _____ Fryer - \$25.00 (per day)

100# Bin of Ice - \$25.00 (per bin)

_____ Hot Box \$25.00 (per day)

Approved	Spectra Food Services	Approved	lSeviervill	lle Convention Center Manager		
Name of Event:			Date of Event:		Booth No	
Firm Name:				Phone No		
Address:						
STREET		CITY		STATE		ZIP CODE
By:		Signature:		Date:		
	(PRINT OR TYPE NAME &	TITLE)				