

# Food Festival & Restaurant Week October 19 through 23 2022

- There is no charge to participate for La Verne Chamber Members
- No charge for non-members that participate in Food Festival & Restaurant Week
- Non Members (must be in La Verne) that participate in Restaurant Week only will be charged \$50 participation fee.

#### **Food Festival:**

# What will be provided to each restaurant/beverage company:

- Two (2) tables, 1- 6 foot for prep and 1- 8 foot for display.
- Simple hanging sign
- Plates, Forks, Spoons, Bowls, Cups, Napkins, Ice (as requested on registration form)

## What each restaurant will need to provide:

- Additional décor/signage. Must not interfere with the visibility of neighboring tables.
- Company logo and Restaurant Week Menus
- Utensils for serving knives, cutting boards, towels, chafers, platters, etc.
- Flyers, Menus, Coupons, marketing materials and incentives for guests to visit the restaurant after the event

# Menu Item(s)

- Plan food to feed 350-500 guests. Sample sizes only.
- All prep-work for menu items to be completed prior to arrival.
- All "leftover" food will be discarded and or removed at the end of the evening.

#### **Additional Guidelines:**

- Food warming by chaffing dishes only, electricity is not available.
- Space is limited to three (3) representatives per table, must be 21 or older.
- Each restaurant will need to adhere to the load-in and load-out schedule.
- After unloading, vehicles must be moved to the designated parking lot.
- Each restaurant must be set-ready to serve food by 5:30 p.m. Restaurants may arrive as early as 3:00 p.m. to set up.
- Each restaurant is required to stay for the duration of the event, the event is open to the public until 9:00pm.
- Each restaurant must remove all materials and trash from the booth space by 10:00 p.m.

**Restaurant Week**, many operations choose to offer several package meals at different price points. Providing several meal options is important because it makes guests with varying budgets feel welcome in your restaurant. A common practice is to have a menu that highlights three price packages. The most expensive option may include a better cut of meat, one cocktail per person, or a bottle of wine for the table. The cheapest option may be as simple as a signature soup or salad complemented by a dessert. There are no set rules for choosing foods for a Prix fixe menu. It can reflect your regular menu and perhaps an opportunity to test new recipes. The menu can be also be sample flight that showcases your house favorites. Offerings must be a minimum of 2 courses, 1 course may be beverage.

### Cancellation:

If for reasons beyond the Chamber's control, the Taste of La Verne must be cancelled, the La Verne Chamber of Commerce is not liable for any cost other than exhibitor space fees. If date or location must be changed for some reason beyond the Chamber's control, a new date or location will be sent out as soon as possible.

Please complete the registration form and return to leah@lavernechamber.org by Monday September 5.



| Restaurant Name:   |  |  |  |
|--|--|--|--|
| Address:   |  |  |  |
| Contact:   |  |  |  |
| nail: Phone  |  |  |  |
| ☐Yes! We want to participate in the Taste of LaVerne Food Festival on Wednesday October 19   |  |  |  |
| Menu item(s)   |  |  |  |
| Please check items you will need:  □Spoons □Forks □Plates □Bowls □ Cups □ Ice □ I will supply my own branded linens □ I will need the chamber to supply linens for my table. |  |  |  |
| ☐Yes! We want to participate in the Taste of LaVerne Restaurant Week October 20-23:  |  |  |  |
| Featured Menu: Menu 1 will be listed in the Taste of La Verne Program  Menu 1 □Breakfast □Brunch □Lunch □Dinner □Take Out Price \$   |  |  |  |
| 1st Course   |  |  |  |
| 2 <sup>nd</sup> Course   |  |  |  |
| 3 <sup>rd</sup> Course   |  |  |  |
| Menu 2 □ Breakfast □ Brunch □ Lunch □ Dinner □ Take Out Price \$   |  |  |  |
| 1 <sup>st</sup> Course   |  |  |  |
| 2 <sup>nd</sup> Course   |  |  |  |
| 3 <sup>rd</sup> Course   |  |  |  |
| Menu 3 □ Breakfast □ Brunch □ Lunch □ Dinner □ Take Out Price \$   |  |  |  |
| 1 <sup>st</sup> Course   |  |  |  |
| 2 <sup>nd</sup> Course   |  |  |  |
| 3 <sup>rd</sup> Course   |  |  |  |
| La Verne Chamber Member □Yes □ No □ Food Festival & Restaurant Week (no charge) □ Restaurant Week Only \$50 participation fee.   |  |  |  |
| Authorized Signature   |  |  |  |

Please complete the registration form and return to <a href="leah@lavernechamber.org">leah@lavernechamber.org</a> by Monday September 5.

# **Exemption Certification for Community Events**

| EXEMPTION REQUEST FORM   |            |                               |           |  |
|--|------------|-------------------------------|-----------|--|
| A. COMMUNITY EVENT   |            |                               |           |  |
| Name of Event: Taste of La Ve  | erne       | Date(s):                      |           |  |
| Address of Event:  |            | City:                         | Zip Code: |  |
| B. VETERAN ORGANIZER OR FOOD BOOTH OPERATOR (Complete if Applicable)   |            |                               |           |  |
| Name:  |            |                               |           |  |
| Mailing Address:   |            | City:                         | Zip Code: |  |
|  |            |                               |           |  |
| □ Veteran Org  | anizer     | □ Veteran Food Booth Operator |           |  |
| C. NON-PROFIT TEMPORARY FOOD FACILITY VENDOR (Check Applicable Boxes)  |            |                               |           |  |
| Name:  |            |                               |           |  |
|  |            | City:                         | Zip Code: |  |
| Indicate exemption requested:  | □ FB-1     | □ FB-2                        | □ FB-3    |  |
| Provide a copy of Articles of Incorporation and proof of 501(C)3 status  |            |                               |           |  |
| D. FOR-PROFIT FOOD FACILITY DONATING ALL PROCEEDS  |            |                               |           |  |
| Food Facility DBA:   |            |                               |           |  |
| Mailing Address:   |            |                               |           |  |
| Owner's Name:  |            |                               |           |  |
| The undersigned hereby agree that <b>ALL</b> proceeds generated will be donated byfor-profit" owner                          |            |                               |           |  |
| to Non-profit association  |            |                               |           |  |
| E. SIGNATURE   |            |                               |           |  |
| I Declare and Certify under penalty of perjury, that the above stated facts and attachments are true and correct pursuant to |            |                               |           |  |
| the California Code of Civil Procedure.  Print Name:Date:  |            |                               |           |  |
| Phone: ( ) -   | e-mail:    |                               |           |  |
| Signature:   |            |                               |           |  |
| Please maintain a copy of the signed Exemption Certification on site during the event.                                       |            |                               |           |  |
| FOR DEPARTMENT USE ONLY  |            |                               |           |  |
| □ Exemption Certification approved.  |            |                               |           |  |
| ☐ Event Organizer does <u>not</u> meet the requirements for exemption certification.   |            |                               |           |  |
| ☐ Temporary Food Facility operator does <u>not</u> meet the requirements for exemption certification.                        |            |                               |           |  |
| ☐ Expedited processing fee applied DPH EH Reviewer   |            |                               | Date:     |  |
| DEU EU KANIAMAL  | FIIII Name |                               | Date:     |  |
|  | Signature: |                               | •         |  |

