



## 2019 Food and Beverage Participation Questionnaire

<b>Business Name:</b>	<b>Contact Name:</b>
<b>Mailing Address:</b>	
<b>City:</b>	<b>Zip:</b>
<b>Phone:</b>	<b>Email:</b>

*Please answer the following questions. Your responses will help us provide for your particular needs.*

- 1. What type of food and/or beverage will you serve? Please be as specific as possible (we provide 6" paper plates, cups and ice).**

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- 2. If you are serving food, will it be:**

- Warm
- Cold
- Room Temperature

- 3. Will you need power?**

- Yes (If Yes, please bring a heavy-duty extension cord at least 15 ft. and a fire extinguisher.)
- No

*If your equipment requires a special plug, you will need to bring one to suit your electrical needs.*

Number of amps: \_\_\_\_\_ Purpose: \_\_\_\_\_

**NOTE:** Please look at your equipment. Only 110 voltage will be available. Use this formula to determine the amount of amps you will need:  $\text{Amps} = \text{Watts} \div 110 \text{ Volts}$

- 4. Please indicate whether or not you have your own EZ Up. If not, we will provide one for you.**

- YES, we will be bringing our own EZ Up.
- NO, we do not have our own EZ Up.

**5. Will you be bringing your own banner? If not, one will be provided for you.**

- YES, we will be bringing our own banner.
- NO, we do not have our own banner

Additional Notes: \_\_\_\_\_  
\_\_\_\_\_

**Please return this questionnaire, along with the following documents no later than August 2nd:**

1. Health Department—Attachment I, declaration of For-Profit Entity
  
2. Signed Indemnification and Hold Harmless Form

Thank you for your response and participation! There will be a City of Brea Volunteer assigned to your booth so you won't have to worry about taking tickets during the event. If you have any questions, please feel free to contact our Special Events Department:

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Event Specialist II  
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**We can't wait to see you there!**



@breaspecialevents