



# Yes! We will participate at the Taste of Coral Springs

February 21, 2012  
Coral Springs Center for the Arts

Please fax by 1/9/2012 to 954-971-3525 to secure your space.

Company Name: _____ <small>As it will appear in marketing</small>
Address: _____
City, St, Zip: _____
Phone: _____ Email or fax: _____
Website Address: _____ Have Facebook? Y or N
Contact Name: _____ Title: _____

Will you promote the Taste of Coral Springs at your location by displaying/handing out:		
#Table Tents: _____	#Check Stuffers: _____	#Posters: _____

Item(s) that will be served: _____
Need power? Yes No (if yes, bring extension cord)
Cooking on site? Yes No (if yes, bring 2 A10BC fire extinguishers)
Type of heating appliance: _____ <small>(grill, fryer, sterno, etc.)</small>
# Tables: 8' serving: _____ 8' prep: _____
Number of staff working event (limit 4 per space): _____

Description of item/gift certificate for silent auction: _____
Description of item/literature for guests' bags (500): _____
<small>Items must be mailed to Taste of Coral Springs, % Junior Achievement, 1130 Coconut Creek Blvd., Coconut Creek, FL 33066 or arrange for delivery/pickup no later than February 6, 2012.</small>

Comments: \_\_\_\_\_

**Your generous participation benefits Coral Springs Cadet Squadron of the Civil Air Patrol,  
Junior Achievement of South Florida, and North Broward YMCA Family Center.**