

SAMPLING REQUEST FORM

Show Name: _____ Show Date: _____

Company Name: _____ Contact: _____

Phone: _____ Email: _____

Address: _____ Suite/Apt: _____

City: _____ State: _____ Zip Code: _____

If different from above, please fill in info for the on-site contact.

Contact: _____ Phone: _____

Product(s) to sample:

Brief description of dispensing method:

- All food and beverage sampling must be pre-approved by the venue.
- Food and beverage samples are limited to 3.5 oz or less.
- Samples must be provided at no charge.
- Alcohol Sampling is prohibited at this event.
- A health permit is required by Jefferson County for sales of food and any food that is temperature controlled. Please find it as part of this Exhibitor Kit.

When submitting this form, you must use " BBJ Sampling Request Form " as the subject line.

This will ensure the request has been received by ACS.

Show Management reserves the right to remove any items which do not meet these requirements.

****IMPORTANT****

All Sampling Request Forms **must** be submitted to ops@acsshows.com.
If you have any questions please contact us at (516) 422-8100.