



## Food and Beverage Sampling Request Form

Exhibitor/Company Contact Information		
Event Name:	In Date:	Out Date:
Company Name:	Booth/Room #:	
Contact Name:	Telephone #:	
Email:	Fax #:	
Address:	Suite #:	
City:	State:	Zip:

Sampling Information						
<p style="text-align: center;"><b>Sampling Requests are reviewed by TCC management based on the following criteria:</b></p> <ol style="list-style-type: none"> <li>1. Does the sample product relate to the event being staged at TCC?</li> <li>2. Is the sample product indigenous (i.e. sold or promoted by) to the company making the request?</li> </ol> <p style="text-align: center;"><b>Sampling portions must not exceed the following:</b></p> <table style="margin-left: auto; margin-right: auto; border: none;"> <tr> <td style="padding: 5px;">Food: 2 ounces</td> <td style="padding: 5px;">Wine: 2 ounces</td> </tr> <tr> <td style="padding: 5px;">Beverages: 2 ounces</td> <td style="padding: 5px;">Beer: 2 ounces</td> </tr> <tr> <td colspan="2" style="padding: 5px; text-align: center;">Liquor: ½ ounce</td> </tr> </table> <p style="font-style: italic; margin-top: 10px;">**Sampled alcohol is served under the Convention Center’s liquor license and therefore an alcohol compliance person or bartender must oversee all alcohol sampling. Please contact the catering department for specific pricing at 813-274-7779.</p>	Food: 2 ounces	Wine: 2 ounces	Beverages: 2 ounces	Beer: 2 ounces	Liquor: ½ ounce	
Food: 2 ounces	Wine: 2 ounces					
Beverages: 2 ounces	Beer: 2 ounces					
Liquor: ½ ounce						

Items to be Sampled	
Item Description	Serving Method (i.e. beverage, sterno, fryer, oven, etc.)

The use of cooking and / or food warming devices require an appropriate fire extinguisher and may also require an on-site Fire Watch, if the device uses an open flame.

Please explain how these products are indigenous to the event and to your company

CATERING APPROVAL _____	Approved Yes _____ No _____	Approved with modification Yes _____ No _____	Declined Yes _____ No _____
EXECUTIVE APPROVAL _____	Approved Yes _____ No _____	Approved with modification Yes _____ No _____	Declined Yes _____ No _____

This form must be completed and submitted a minimum of 45 days prior to the first day of the event. For more information please contact TCC Catering at 813-274-7779 or <mailto:tcc-catering@aramark.com>.