

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.
- Cooking is not permitted inside the facility.
- Food & Beverage Samples may not exceed 1 sq inch or 2 fluid oz.
- Samples must be provided at no charge.
- Alcohol Sampling is prohibited at this event.
- Use of gas(ie propane) is not permitted. Sternos are permitted and must be attended at all times

When submitting this form, you must use " BEN - 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.