



***Taste of Downtown
Restaurant Participation Form
Wednesday, September 1st, 2010
5:00 p.m. to 9:00 p.m.***

Restaurant Name: _____

Address: _____

Phone: _____

Email: _____

Name of Manager/Owner: _____

Date: _____ Signature of Manager/Owner: _____

Detailed description of house specialty sample or dessert to be served: _____

Detailed description of taste samples must be submitted for approval by NO LATER than Tuesday, July 6th, 2010.

What is a Taste?

- Acceptable tastes should consist of a few mouthfuls of your house specialty.
- Taste samples should be served buffet style or sit down style.
- One serving per guest.
- The ultimate goal of the taste is to promote Downtown's fabulous restaurants and cuisine; therefore, McFarlane Promotions reserves the right to refuse entry to any restaurant that fails to comply with the standards of the Taste of Downtown.

Yes I would like to participate in the KUSI TV spot TBD.

(Limited to first 8 restaurants)

6:20 a.m. first live spot: Morning Phone # _____

6:45 a.m. second live spot: Morning Phone: # _____

I would like to open my business at 5:30 a.m. to host the KUSI spot: _____

Yes, I would like to provide food for the "on-air" radio promotions with STAR 94.1, Channel 93.3, Magic 92.5, Z90.3, and New Country 95.7:

(Limited Spots Available) _____

Morning Phone # _____

Yes, I would like to sell tickets to the Taste of Downtown at my restaurant _____ **(limited to first 2 entrants from each area)**

Please fax back this registration form to McFarlane Promotions at 619-233-0898 by **Tuesday, July 6th, 2010** to be included in the Taste of Downtown.

The Downtown San Diego Partnership looks forward to your participation and we wish to thank you for your generous time and support.