



Restaurants/Food Purveyors Registration Form

1st Annual California Wine Festival - Dana Point, April 22- 23-24, 2010
7th Annual California Wine Festival - Santa Barbara, July 15-16-17, 2010

Complete form and email to emily@californiawinefestival.com or print out and FAX to Emily Kaufmann, V.P., @ 866-273-4148

Please complete all sections. Return with credit card information or mail with check payable to:

California Wine Festival, P.O. Box 90358, Santa Barbara, CA 93190

Questions: email emily@californiawinefestival.com or phone: 805-886-5103

See you at the Festival!

Company Name	Conta	ct	Mobile
Address	City	State	ZIP
Phone	Fax	Email	
To Pay Fees w/ credit card enter Cardholder Name (Name on credit card)			
Credit Card Type	Cre	dit Card Number	Ex piration Date

NOTE: Your company name and web site address will be **printed in the program**, displayed **on our website** and linked to your site. Your booth sign will carry the name of your company.

Event Participation & Fees

Please check events in which you will participate.

- 1. Thurs., April 22, Sustainable Seafood & Wine Tasting, Location TBD, 6:00 pm - 9 pm (400 max.) \$100
- 2. Fri., April 23, Sunset Rare & Reserve Wine Tasting, Location TBD, 6:30 pm - 9 pm (400 max.) \$100
- 3. Sat., April 24, Beachside Wine Festival, Doheny State Beach, - Dana Point 11:30 am - 4 pm (2000) \$450*
- 4. Thurs., July 15, Old Spanish Nights! (Tapas, Flamenco/Spanish dance and music) Wine Tasting; Historic De La Guerra Adobe Courtyard, downtown Santa Barbara, 5:30 pm - 8:00 pm (200-300) \$100
- 5. Fri., July 16, Sunset Rare & Reserve Wine Tasting, Chase Palm Park Pavilion, 6:30 pm - 9 pm (400 max.) \$100
- 6. Sat., July 17, Beachside Wine Festival, Chase Palm Park, 11:30 am - 4 pm (2500-3000) \$450*
- * DONATION (CREDIT) -Check here if you agree to donate (and ship) an item w/retail value of \$100 or more for our fundraising efforts for our non-profits. (\$100)
- "ALL EVENTS" (CREDIT) – Deduct additional \$200 if participating in ALL EVENTS above. (\$200)

PLEASE TOTAL EXHIBITOR FEE AMOUNT DUE HERE \$ _____

Paid by: (circle one) Credit Card or check (date mailed) _____