

WISCONSIN CHEESE PRODUCER REGISTRATION

Eagle River Area Festival of Flavors

August 25 & 26, 2012

Riverview Park, Eagle River, Wisconsin

Fill Out Immediately and Return!!

Name of participating business _____

Primary contact or contacts _____

e-mail address _____

Mailing address _____

Phone number during the day _____ cell phone _____

I will supply product and sample up to four varieties of my Wisconsin produced cheese to the public, from **11 a.m.-4 p.m. on Saturday, August 25th**, and **11 a.m.-3 p.m. on Sunday, August 26th, 2012**. We estimate that 3000 will attend the tasting in 2012, and that 5000 people will attend the entire festival. Please remember that attendance is only an estimate for any event, and the committee cannot be held responsible for over or under estimating. A general tasting admission will be charged with NO tickets used at the booths. I understand that for morning set up I must be ready by 10:30 a.m. to serve by 11 a.m. and I will provide enough cheese to serve until 4 p.m. Saturday and 3 p.m. Sunday (no early tear down). Two tables, linen covered (front table skirted), and 3' X 5' banner (if needed) will be provided by the committee, along with two complimentary festival caps for cheese producers attending.

Cheeses I will sample and sell from my booth (up to four varieties)

For promotional purposes, please provide information below about your cheese company and your sampled cheeses, awards, interesting facts, offerings, including location and contact information, web-site, etc. Please distribute your company literature and recipes from your booth. **All exhibitors will have a link to the festival web-site!! Please send your info RIGHT AWAY!**

Please also provide recipes using your cheeses along with this form, for marketing purposes!

I agree to all of the above information (sign and date) _____

Booth set up details will be sent in the future. I plan to attend the **WELCOME RECEPTION** for cheese producers, wineries, other producers and sponsors on **Friday, August 24th at Riverstone Restaurant**

___Yes ___No If yes, how many will attend from your company? _____ ****A GREAT TIME WAS HAD BY ALL IN 2011!**

Come mingle! Please copy this completed form for your records and send form to:

Cindy Meinholz, Riverstone Restaurant

219 N. Railroad St.

Eagle River, WI 54521 OR to:

**Eagle River Revitalization Program
Festival of Flavors
Attention: WI Cheese Lovers
P.O. Box 2302
Eagle River, WI 54521**

THANK-YOU!

Questions? meinholz48@yahoo.com

(715)479-8467 OR

John Seward, ERRP (715)477-0645