



Kay Bailey Hutchinson Convention Center Dallas  
650, S Griffin, Dallas, TX 75202  
(214) 743-2514 Phone (214) 743-2515 Fax

**Food and Beverage Sampling Authorization Form**

Client / Show Management are responsible for distributing this form to all exhibitors and ensuring that all guidelines are adhered to during the event.

**GENERAL CONDITIONS:**

1. Items dispensed are limited to products manufactured, represented or processed by the exhibiting firm
2. All items are limited to SAMPLE SIZE. Below are the maximum sample sizes:-
  - a) Non Alcoholic Beverages are limited to maximum of 3 fluid oz. Any alcoholic beverage must be purchased and dispensed by Centerplate Catering.
  - b) Food items are limited to 2oz or less
3. The applicant named below acknowledges they have the sole responsibility for distribution of such items in compliance with all applicable laws to include the Texas Alcohol Beverage Code. Accordingly, the applicant agrees to comply with all applicable laws and to indemnify and forever hold harmless Centerplate, the Kay Bailey Hutchinson Convention Center and the City of Dallas from all liabilities, damages, losses or expenses resulting directly or indirectly from disposition of such items
4. Each Exhibitor is responsible for securing a City of Dallas Temporary Health Permit, issued by the City of Dallas Health Department. The Health Department may be reached at (214-670-8083). All permits must be obtained prior to sampling and must be displayed in booths at all times. Any exhibitor who does not adhere to this condition for sampling will be asked to remove their sampling items
5. Centerplate will access a "loss of revenue" fee for an exhibitor who wishes to sample in excess of the sampling size maximums. Please consult with your catering representative who may provide additional information. All fees must be pre-paid prior to event move in
6. No food and beverage may be sold on the premises

Event Name \_\_\_\_\_ Event Date \_\_\_\_\_

Applicant Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Onsite Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

Email address \_\_\_\_\_ Booth # \_\_\_\_\_

Items to be sampled \_\_\_\_\_ Sample Size \_\_\_\_\_

***In signing below I understand and agree to the terms and conditions above.***

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_