



**AUTHORIZATION REQUEST  
SAMPLE FOOD AND/OR BEVERAGE DISTRIBUTION**

ARAMARK has the exclusive food and beverage rights within the Washington State Convention Center.  
Organizations and/or their exhibitors may distribute sample food and/or beverage products only upon written authorization.

**GENERAL CONDITIONS:**

1. A certificate of liability naming ARAMARK as an additional insured **MUST** be submitted to ARAMARK at least five (5) days prior to first day of the show.
2. Items dispensed in exhibit space are limited to products manufactured, processed or distributed by exhibiting company.  
3. All items are limited to SAMPLE SIZES and may be distributed from exhibit location only.  
    a) Non-alcoholic beverage samples, including energy drinks, are limited to maximum three (3) ounce containers.  
    b) Food items are limited to two (2) ounces or bite size portions.  
    c) Beer and Wine is limited to two (2) Ounce Portions  
    d) Distiller Liquor is limited to ½ Ounce Portions  
4. Alcohol Sampling requires the additional submission to ARAMARK of a Class 8 Permit, obtained for the WSLCB  
4. The applicant named acknowledges having sole responsibility for sampling product in compliance with laws including King County Health Code and the Washington State Liquor Control Board. City of Seattle Health permits are the sole responsibility of applicant and must be displayed and accessible during the show.  
5. Food and/or beverage items as traffic promoters (i.e., popcorn, coffee, bar service) **MUST** be purchased through ARAMARK.

**CONVENTION NAME:** \_\_\_\_\_

**COMPANY NAME:** \_\_\_\_\_

**COMPANY WEBSITE:** \_\_\_\_\_

**BOOTH/ROOM #:** \_\_\_\_\_

**CONTACT NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **FAX:** \_\_\_\_\_

**PRODUCT TO BE SAMPLED:** \_\_\_\_\_

**PORTION SIZE:** \_\_\_\_\_ **PROPOSED METHOD OF DISTRIBUTION:** \_\_\_\_\_

**PURPOSE FOR SAMPLING:** a. BOOTH TRAFFIC (see #5.) \_\_\_\_\_ b. PRODUCT REPRESENTATION \_\_\_\_\_

**SERVICES REQUIRED:**      Appropriate Charges will be quoted after request has been received. **Please Note:** This is not an order form – an ARAMARK Sales Manager will contact you to obtain more information regarding the services you require. All sample requests **MUST** receive prior approval from ARAMARK. Non compliant exhibitors will be asked to remove outside product from the facility immediately.

In signing below, applicant understands and agrees to the terms and conditions above.

**APPLICANT SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

***PLEASE COMPLETE THIS FORM IN ITS ENTIRETY AND RETURN TO:***

Washington State Convention Center  
ATTN: Exhibitor Services  
705 Pike St  
Seattle, WA 98101  
(206) 694-5015 – Fax (206) 212-2328  
exhibitor.services@wscc.com