

**OLD FALLS STREET
NIAGARA FALLS, NY**

**DATE AND TIMES AT
COREYMCOWAN.COM**



Complete informational packet is available online to outline all important event details

VENDOR CATEGORIES

FOOD/DRINK VENDORS	
Any vendor serving food to be consumed on site	250
NON-FOOD VENDORS	125
Any area services, products or specialty business	
NOT FOR PROFITS	75
Area organizations, clubs or charity groups	
FARMS	NC

A LA CARTE

HEALTH PERMIT **INC**

We will file and take care of your health permit fee

EVENT SEATING **INC**

The event will provide areas for patron seating

ACCESS TO WATER **INC**

Potable water will be available for you at the event

EVENT MARKETING **INC**

We will promote your business through our event marketing

ENTERTAINMENT **INC**

Musical entertainment will be provided for entire event

ELECTRICITY **50**

EVENT OVERVIEW

FOOD PORTIONS

All food items must be sold in sample sizes

FOOD PRICING

Food is purchased using tickets valued at \$1 each. Min \$2 | Max \$6

TICKET SYSTEM

Vendors may only accept tickets as compensation. Remit 5%

BEVERAGE POLICY

Vendors are only allowed to sell pre-approved specialty beverages.

VENDOR LOCATIONS

Early response guarantees location choice. First come, first serve. Layouts given at event check-in

DEADLINES

**BEFORE
EVENT**

EVENT APPLICATION

Application fee is due upon receiving your application **4 WEEKS**

MENU ITEMS

Needed for health permit and menu publications **4 WEEKS**

INSURANCE

Certificate naming three additional insured required **4 WEEKS**

LATE APPLICATIONS

Being sent after first due date will incur a \$25 late fee **2 WEEKS**

BUSINESS NAME -----
CONTACT NAME -----
ADDRESS -----
PHONE -----
EMAIL -----



**SEND APPLICATION WITH LISTED ITEMS TO 1879 WHITEHAVEN RD #400 OR
 EMAIL TO COREY.MCGOWAN89@ICLOUD.COM**

EVENT FEE INSURANCE CERTIFICATES MENU LIST

PAYMENT METHOD(PLEASE SELECT ONE): **PROMO CODE:**

1. CARD NUMBER (4% FEE):
 EXPIRATION DATE: ____ SEC CODE: ___ ZIP: _____
2. CASH - MUST BE DELIVERED WITH APPLICATION
3. CHECK # MADE PAYABLE TO COREY MCGOWAN PRODUCTIONS:

VENDOR CATEGORY (PLEASE SELECT ONE):

RESTAURANT NON-FOOD VENDOR NOT FOR PROFIT
 OTHER (DESCRIPTION) -----

AMENITIES (ELECTRICITY LIMITED; NOT GUARANTEED)

DO YOU NEED WATER? YES NO DO YOU NEED ELECTRICITY? YES NO

PLEASE LIST NEEDS FOR ELECTRICITY:

MENU CHOICES (3 MENU ITEMS MAX)

MANDATORY HEALTHY OPTION - CASH PRIZE (SEPARATE APP ATTACHED)

FOOD ITEM & DESCRIPTION	PRICE IN TICKETS
1. -----	-----
2. -----	-----
3. -----	-----

**I AGREE TO ABIDE BY THE GUIDELINES OF THE EVENT INFORMATIONAL
 PACKET READ AT WWW.COREYMCOWAN.COM. I UNDERSTAND THAT ALL
 PROMOTION OF MY ITEMS MUST TAKE PLACE WITHIN THE CONFINES OF MY
 BOOTH. I FURTHER UNDERSTAND THAT COREY MCGOWAN
 PRODUCTIONS AND ALL OF THEIR REPRESENTATIVES ARE NOT RESPONSIBLE
 FOR OR LIABLE FOR DAMAGES INCLUDING, BUT NOT LIMITED TO, LOSS
 SUFFERED BEFORE, DURING, OR AFTER EACH EVENT. I UNDERSTAND THAT
 THERE ARE NO REFUNDS OR RAIN CHECKS DUE TO INCLEMENT WEATHER.**

PRINT NAME: -----

SIGNATURE: -----

GO HEALTHY!

AND WIN

at

THE TASTE OF NIAGARA FALLS

The Independent Health Foundation is excited to bring the Healthy Options® program to this year's Taste of Niagara Falls! All participating restaurants and food trucks are required to designate one item as a "Healthy Option" and will have the **chance to win a \$500, \$250 or \$100 cash prize!**

Healthy Options was created to help our community make informed decisions about healthy eating. Being able to find our orange sticker around town means that someone can make a heart-healthy decision knowing the menu item is considered lower in fat, saturated fat, cholesterol and/or sodium.



HOW DO I PARTICIPATE?

Online forms are available on our website, www.healthyoptionsbuffalo.com, using our restaurant sign-up button. Or, you can complete the recipe form on the back side of this sheet. Our registered dietitian and staff will work closely with your restaurant to ensure your menu item meets the Healthy Options program criteria (also available online). We will notify you once we've approved your menu item, which will be **promoted for FREE on our website.**

HOW DO I WIN?

A panel of judges will have the opportunity to vote for their favorite Healthy Options menu item throughout the event. The top three winners will receive a \$500, \$250 or \$100 cash prize, as well as recognition on our website.

ARE THERE OTHER EVENTS I CAN PARTICIPATE IN?

We're glad you asked! By joining Healthy Options, you'll have the opportunity to participate in various events throughout the year and gain exposure for your restaurant on our website, through social media, and in other promotional materials that we use year-round. Healthy Options is a FREE program that currently features more than 200 participating restaurants and food trucks throughout Western New York.

Questions?

For more information, or to participate in the Healthy Options program, please contact the Independent Health Foundation at (716) 635-4959 or info@healthyoptionsbuffalo.com.





SKIP THE PAPER!

Visit HealthyOptionsBuffalo.com and submit your recipe using our Restaurant Sign Up button OR fill out this recipe form.

Event Name: _____

Vendor Name: _____

Contact Person: _____

Phone Number: _____ Email: _____

Best Time to Reach Contact Person: _____

Recipe Name: _____

Number of Servings: _____ Portion Size per Serving: _____
(e.g. 1/2 serving is approximately 1/2 cup, or this is the dinner-sized portion)

Ingredient	Amount Used

Cooking Directions:

Return completed form by:
Fax: (716) 635-3984
Email: info@healthyoptionsbuffalo.com
Mail: Independent Health Foundation
511 Farber Lakes Drive
Buffalo, NY 14221

Questions?
We're here to help! Please contact the Independent Health Foundation at (716) 635-4959.