

2018 REGISTRATION FORM

The Malta Business and Professional Association would like to invite you to be a part of the $\underline{10^{th} Annual Taste \ of Malta!}$

WHO:	20 MBPA Member Restaurants who want to showcase their fare	
WHAT:	10th Annual Taste of Malta (filled with prize drawings throughout evening)	
WHEN:	Tuesday, July 17, 2018 5:30 - 7:30pm with set-up from 4:30 - 5:30pm REGISTRATION IS FIRST COME, FIRST SERVE AND MUST BE RECEIVED BY June 15 to be included on print advertising!	
WHERE:	Hudson Valley Community College's TEC-SMART Campus 345 Hermes Road, Malta	
WHY:	Last year roughly 300 people attended the event and proceeds of \$4,000 were donated to the Partnership for Innovation in Education of Ballston Spa Central School District. You will be raising awareness of your restaurant, taking part in a popular community event and raising money for our local school children!	
HOW:	Simply fill out the form below and email it to <u>TasteofMalta.est2009@gmail.com</u> or send it to MBPA, TASTE OF MALTA, PO Box 2394, Malta, NY 12020. We'll also need a high-resolution logo for your restaurant logo to use on marketing materials emailed to <u>TasteofMalta.est2009@gmail.com</u> .	
Restaurant N	Name:	
Address:		
Contact Pers	son:	
Phone:	Email:	
We will be s	serving:	
I Do I need: 1 o I would like	Need Don't Need Electric or 2 tables for setup (circle one) to set up Inside or Outside	
	ld like to donate 1 dinner gift certificate (\$50+) for the Grand Prize drawing of 12 dinners in a year. ertificate included with my registration ORI will send certificate to PO Box 2394, Malta.	