

| Form C | | F&B Logistics Planning Form | |
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| <p>INSTRUCTIONS: Please complete this form and email it to Jill Grotzinger, Jill.Grotzinger@artsandrec-op.org, or fax, 913.897.4467. Tickets are distributed in June after all required documentation is returned (Forms B, C & copy of insurance). Stipends are distributed the evening of the event.</p> | | | |
| Participant Name | | <i>(Restaurant or Vendor group name – as you want it to appear in the program and signage)</i> | |
| Contact Name: | | Cell Number: | |
| Check in | | | |
| Number of people who will participate at your food station. | | (# needed for insect bands. Note: ALL must be 21 yrs old or above , IDs may be checked.) | |
| Will you purchase any additional tickets? <input type="checkbox"/> Yes <input type="checkbox"/> No (Tickets may be purchased at www.stemsoiree.org for \$125 each by April 30th; \$150 thereafter.) (Each participating restaurant will receive 4 tickets prior to the event.) | | | |
| Menu/Signage | | | |
| List your menu as you want it to appear in the program and/or signage | | (Menus must be approved by a Stems Representative to minimize duplication.) | |
| Does your menu require a "Raw Food/Allergy" advisory sign? | | <input type="checkbox"/> Yes <input type="checkbox"/> No If so, for what menu item(s)? | |
| Equipment and Food Preparation | | | |
| Stems will provide two 8' tables and two chairs at each food station. List additional needs. | | | |
| Will you cook onsite? | | <input type="checkbox"/> Yes <input type="checkbox"/> No If so, what will you cook and what equipment will you use to cook? | |
| Will you prep onsite? | | <input type="checkbox"/> Yes <input type="checkbox"/> No If so, what will you prep and what equipment will you use to prep? | |
| Other Equipment? | | | |
| List your procedures to hold HOT foods: | | | |
| List your procedures to hold COLD foods: | | | |
| Will you need to store food in the refrigerator truck? | | <input type="checkbox"/> Yes <input type="checkbox"/> No If so, what and how much space do you need? NOTE: Containers must be labeled properly for easy identification during the event. | |
| Supplies | | | |

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| Ice (List # of 40 lb bags) | |
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| Dinnerware/Utensils | <input type="checkbox"/> Plates <input type="checkbox"/> Bowls | <input type="checkbox"/> Napkins <input type="checkbox"/> Forks | <input type="checkbox"/> Knives <input type="checkbox"/> Spoons |
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| Promo Items |
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| Do you plan to handout promo items? | <input type="checkbox"/> Yes <input type="checkbox"/> No If so, what? (Items might include wine charms, koozies, glow-in-the-dark jewelry, etc. All items must be approved by a Stems Representative.) |
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| Parking, Setup/Teardown, Scheduling |
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| Will you use a large vehicle (van, truck, trailer) for load in/out?* | <input type="checkbox"/> Yes <input type="checkbox"/> No If so, what? **MUST stay in pre-approved parking areas; no vehicles on grass at any time. |
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| How much set-up time do you need? | |
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| Would you participate in early set-up (early morning on event day)? | <input type="checkbox"/> Yes <input type="checkbox"/> No Explain: |
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Tear-down – Will you be able to take all of your equipment off the premises by 12 midnight Saturday, or will you need to return on Sunday morning (no later than 10a.m.)? Saturday night Sunday morning

Note: Stems or the Arboretum are not responsible for damage or loss of property left at the Arboretum overnight.

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| Will you need assistance before, during, or after the event? | <input type="checkbox"/> Yes <input type="checkbox"/> No If so, explain your needs: |
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| Stems set-up is responsible for setting up equipment provided by Stems (tables, chairs, 5gal sanitizer bucket, fan, etc.). Indicate special instructions for how your area needs to be setup. | |
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| Electrical & Lighting |
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Consider the following when completing this section:

- All equipment you plan to use (food preparation equipment, serving, warming trays, displays, etc.) and indicate all electrical/lighting devices needed for them to function.
- The power layout for each event destination will be configured based on the requirements you indicate.

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| <p>▪ For electrical/lighting questions or to communicate changes to requirements after submitting this form, contact Travis Brown (xtremeelec@yahoo.com).</p> | | |
| Electrical & Lighting (cont.) | | |
| Equipment | Description | Technical Electrical Requirements |
| Illumination Lighting | | |
| Decorative Lighting | | |
| Sound/Musical | | |
| Computer(s)/Displays & Monitors | | |
| Other: Specify | | |
| Indicate any pertinent information about your equipment that impacts electrical/lighting | | |
| General | | |
| Describe personal decorations you will bring. | | |
| | <i>(Decorations must be approved by a Stems Representative.)</i> | |
| Include general notes, comments, special needs, concerns, or questions and we will respond. | | |