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| a**Empty Bowls Brenham - 2018****Soup Sponsor Reply Form****Please note your donation is tax-deductible.** Please complete and email this form to brenhamemptybowls@gmail.com**Questions**? Please contact Vikram Iyer:vikram.iyer@yahoo.com / (214)-308-1777Business Name |  |
| Address |  |
| City/State/Zip |  |
| Home Phone |  | Cell Phone |  |
| Email |  |
| Website |  |
| Contact Name |  |
| Contact Email |  |
| Name/Type of Soup |  |
| Soup Qty (in gallons) |  |
| Please check all that apply:  **Vegan**  **Vegetarian**  **Gluten Free** |
| For food allergy precautions, please indicate if your soup contains the following: |
|  **Gluten**  **Peanuts**  **Milk**  **Shellfish**  **Soy**  **Eggs**  **Wheat**  **Tree Nuts**  |
| For logistics planning purposes, please specify which **one of the following options** apply to you: |
|  | We **WILL** bring the soup to the event, set up our soup and display, stay and serve our soup |
|  | Number of staff attending |  |
|  | We **WILL** deliver the soup to the event, but we can’t stay. We’ll need someone else to serve our soup.  |
|  | **Please note:** All soup must be delivered to the event location between **10:00-10:30 a.m. on Friday, November 2 2018** |
|  | We **WILL** **NOT** deliver or serve. We will need our soup picked up.  |
|  | **Please note:** soup should be ready for pick up on **Friday, November 2 before 9 AM.** Please indicate the name of a contact to assist on the day of soup pick-up |
| **Contact Name** |  | **Business Phone** |  | **Cell Phone** |  |

***Thank you for your support!***