



RESTAURANT REGISTRATION FORM

**AMERICAN LIVER FOUNDATION'S
SIXTH ANNUAL TIM MOTE
TASTE OF DESOTO**

THE ARENA AT SOUTHAVEN
7360 US 51, Southaven, MS
TUESDAY, MARCH 23, 2010 ~ 5:30 – 9:00 p.m.

Restaurant or Catering Name (as you wish it to appear on signage & in publicity):

Name: _____

Address: _____

City: _____ ST: _____ Zip _____

Telephone: _____ Fax: _____

Contact: _____

Title: _____

Email: _____

SPECIALTIES TO BE SERVED, LIST CHOICES: ENTRÉE, VEGETABLE, DESSERT, ETC.

I agree to abide by the enclosed instructions established by the Taste of DeSoto Committee and the American Liver Foundation.

DATE: _____ SIGNED: _____

PLEASE RETURN COMPLETED AGREEMENT NO LATER THAN: February 22, 2010

Send completed agreement via email to dwhittaker@liverfoundation.org, fax to 901-766-2061 or mail to:

American Liver Foundation Mid-South Division
5050 Poplar Avenue, Suite 1526, Memphis, TN 38157

For additional information call or Carla Paradine @ 901-921-2346,
Angie Hick @ 901-337-1795 or Denise Blassingame @ 901-485-4041



**IF YOU REGISTER PRIOR TO JANUARY 15 YOU WILL RECEIVE TWO
ADDITIONAL WRISTBANDS FOR ENTRY.**