

## Interest/Orientation Registration Form

## **GENERAL**

1.	Are you an established food truck business? ☐ YES / ☐ NO
2.	Are you a home-based food business? $\square$ YES / $\square$ NO
3.	Name of Business:
4.	Name of Business Owner/Operator:
5.	Contact Information: a. Phone: b. Email:
6.	Business Website or Social Media (if available):
7.	Do you currently have a valid health permit and are an approved food truck vendor in Riverside County? $\square$ YES / $\square$ NO If yes, please submit a screenshot of your business name on the <u>Active Mobile Food Facility list</u> .
8.	How did you hear about the program?
9.	Which orientation session do you want to register for (choose one):  ☐ Thursday, March 20th @ 5:00pm - 6:30pm; Coachella Library 1500 Sixth St. Coachella, CA  or  ☐ Monday, March 24th @ 2:00pm - 3:30pm; Coachella Library 1500 Sixth St. Coachella, CA

## **HEALTHY FOOD MENU**

10. Please submit a screenshot of your entire menu.

(If no, go to Question 14)
<ul><li>12. Please list the name of the healthy menu items you will submit for review:</li><li>1.</li><li>2.</li><li>3.</li><li>4.</li><li>5.</li></ul>
13. Do you have a marketing plan to launch, promote, and drive sales for your healthy menu items? $\ \square$ YES / $\ \square$ NO
14. If you do not have your healthy menu items created, do you need coaching and support to help you create new recipes? ☐ YES / ☐ NO
15. If you do not have a marketing plan for your healthy menu items, do you want coaching and support to create a plan? $\ \square$ YES / $\ \square$ NO

## **SUBMITTAL INSTRUCTIONS**

Please email the Interest/Orientation Registration form to planning@coachella.org or submit in-person to the Planning Division at 53990 Enterprise Way, Coachella, CA 92236.