



2010 Taste of Park Ridge  
Participation Application

120 Main Street, Suite 202

Park Ridge, IL 60068

847-823-5300 • FAX 847-823-7832

To have your business added to our wait list please email, fax or mail this completed form to us.

Date

Business Name

Address

City, State, Zip

Contact Name

Contact Cell #

Email:

Fax:

Primary Menu  
Items

For more information please check our website at: <http://www.tasteofparkridge.com/>

Or contact:

Dean Patras      C) 847 567-3326    Email) [dtp48@aol.com](mailto:dtp48@aol.com)    Fax) 847 692-6807

Dave or Robin Iglow      C) 708 822-1028    Email) [pinesofparkridge@ameritech.net](mailto:pinesofparkridge@ameritech.net)