



**CHRISTMAS MARKET
2017 VENDOR'S APPLICATION FORM**

Signature of Vendor: _____ Print Name: _____

Business Name: _____ Date: _____

Please provide a description of items you will be selling. You are to sell only what we have seen & juried.

Special requirements (Electricity etc.): _____

Size table (6', 8', 8'+extra space): _____ Vehicle reg. #: _____

Set-up time (afternoon 2pm-3:45pm Nov. 24th **OR** early morning 7:30am-9:15am Nov. 25th): _____

Contact Person: _____

Website: _____

Email: _____

Address: _____

Phone (Res): _____ (Bus/Cell): _____ (Fax): _____

*Yes, I understand that I must submit a signed copy of the Christmas Market Vendor Waiver to affirm my reservation.

*Yes, I understand that for jurying I must supply 3 (three) pictures. These photos will be representative of what I will be selling. (Please no website referrals of your product.)

*Yes, I understand and agree to abide by the 2017 Christmas Market Policies.

*I understand I must submit the full amount of the table rental with the application. (It will be deposited only if you are accepted and informed.)

To apply, a signed copy of this agreement is to be mailed to the address below.

Mail to:

**Christmas on the Peninsula Society - Christmas Market
c/o South Surrey & White Rock Chamber of Commerce
22-1480 Foster Street
White Rock, BC
V4B 3X7**

