

Summerland Exhibition Association

Box 398 Summerland BC, V0H 1Z0

(250) 583-9178

summerlandfallfair@shaw.ca

www.summerlandfallfair.com

VENDOR REGISTRATION

Fall Fair, **September 10 & 11th, 2011** — Summerland Curling Rink, 8820 Jubilee Rd. E.

Please print clearly

Organization/Business: _____

Mailing Address: _____

Contacts name _____ **Tel:** _____ **Cell:** _____ **E-mail:** _____

Type of Products: _____

Please check your needs below:

- INDOOR** booth spaces - 10' back wall, two 8'x4' side arms, table provided if checked below
- INDOOR** table space only. No walls. Table provided if checked below
- OUTDOOR** space negotiable. Size area required? _____ Own tent/canopy? _____
- Table 2 1/2 x 8'
- Electricity..... provide your own extension cords, location dictated by need for power, only 110volt
- Vendor passes ? number _____

SET UP TIMES — Friday, September 9th from 1:00 pm to 8:00 pm, unless otherwise arranged

All sites **must be set up**, when public gates open, Saturday 10am-8pm and Sunday 10am – 3pm.

TAKE DOWN TIME — Sunday 3:00 pm **NO EARLIER**

Overnight professional security provided Thursday pm to Sunday am.

Food Vendors must contact Summerland Exhibition Association to discuss Exhibition requirements and arrange contract agreement. Written proof is required stating the Summerland Exhibition Association has been added to your insurance policy as “*additional insured*” for dates of the fair. In addition a valid Food Safe certificate must be posted at your fair site. Contact summerlandfallfair@shaw.ca to make your arrangements.

REGISTRATION FEE — Indoor booth: **\$100.00** Indoor Table Space: **\$50.00** Outdoor space: **\$75.00**

Registration and payment deadline is AUGUST 1ST.

Make cheque payable to the Summerland Exhibition Association. Cheques **MUST** accompany this completed form.

LIABILITY WAIVER It is hereby agreed that _____ holds the Summerland Exhibition Association harmless from any liabilities which may arise from the use of any product and/or service which they offer.

Date: _____ **Signature:** _____

Office use only: Date received: _____ Confirmation: _____