

Regular Vendor Contract Shannonville World's Fair - 2024 Aug. 23, 24 & 25 (Non-Food Truck)

Company Name: _			
Contact Name:			
Address:			
Tel. #:			
Description of Products: (If needed, list of products/prices may be attached			

Name of Your Insurance Co. & Policy: _____

You may also apply for our Vendor Event Insurance Coverage during the 3 days of the fair at this link.. https://apps.ca.ics.duuo.ca/booth-operation/protections/list/?prescriptionGroup=oaassvwf

Check_____if you have purchased our event policy as we will receive an email confirming your coverage.

(A typical space is 20' x 20' with 20' frontage where the vendor can park their vehicle beside their space.

- Number of spaces to be rented _____@ \$25.00 per space = \$ ______
- Total Payment Required = \$_____

Select Your Payment Option

- E-transfer to... saspayments8420@gmail.com (use security code.... melrose)
- or
 - Mail cheque and application form to Shannonville Agricultural Society, P.O. Box 228, Shannonville, Ont. K0K 3A0 *Email completed form to treasurersas2024@gmail.com or hard copy mail to above Postal Address)*

I have read the Vendor information provided with this application and agree to the Terms and Conditions outlined in it. I have included all payment and pertinent paper work.

Dated this day of 2024

Vendor Signature:

(Just print or type)