

Mill Race Festival of Traditional Folk Music Vendors Application

Please scan, fill out the form and email to Jenniferlynnmarieregner@gmail.com Please include all signature pages, photo's of product and filled out check list. Put N/A in non applicable fields

Name of business									
Business Owner name (first,last)									
Phone number					Email				
Address					City				
Postal code					Please mark an X indicating what type of vendor you are				
What type of vendor are you?					<input type="checkbox"/> Craft Vendor		<input type="checkbox"/> Food Vendor		
Do you require Electricity?					<input type="checkbox"/> Yes		<input type="checkbox"/> NO		
Please list the names and phone numbers of those who will be on site the day of the event.									
Attendants first and last name									
Contact number day of event									
Please check the day attendant will be working the event									
Friday 5:30-11pm					Will you be there the entire day?				
Saturday 11am-11pm		<input type="checkbox"/> Yes					<input type="checkbox"/> No		
Sunday 11am-10pm		<input type="checkbox"/> Other					<input type="checkbox"/> List Times		
Attendants first and last name									
Contact number day of event									
Please check the days attendant will be working the event									
Friday 5:30-11pm					Will you be there the entire day?				
Saturday 11am-11pm		<input type="checkbox"/> Yes					<input type="checkbox"/> No		
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Sunday 11am-10pm		<input type="checkbox"/> Other					<input type="checkbox"/> List Times		
Attendants first and last name									

Contact number day of event			
Please list the types of items your business will be selling			
If you're a food vendor check here		if you will be giving out samples & list below in parentases	

IF YOU ARE DOING HENNA/BODY ART PLEASE ATTACH A COPY OF YOU LIABILITY INSURANCE WITH YOUR APPLICATION. IF YOU DO NOT INCLUDE YOUR LIABILITY INSURANCE WITH YOUR APPLICATION YOU WILL NOT BE ACCEPTED AS A VENDOR (please sign and date below if you are a henna or body art vendor indicating you understand your application will be denied if a copy of liability insurance is not provided upon handing in application)

Name		Signature	
Date			

Check fees box that applies to your business			
	Craft Vendor \$80.00		Food Vendor \$200
			Body art Vendor \$100

Indicate how you will be paying fees			
I will be paying by cheque		List Cheque number	

Please write what name the check will be coming from			

If you are paying by cheque please make the cheque payable to the "Mill Race Folk Society" to:
Mill Race Folk Festival P.O. Box 22148, Cambridge, ON, N1R 8E3