Revelstoke Farm and Craft Market

Vendor Application Form- Christmas Market

Saturday, November 19th, 2022 10am-3pm (set-up 8am) Community Center- 600 Campbell Ave.

vendor Name:		
Business Name:		
Mailing Address:		
City:	Province:	Postal:
Phone #:	Cell:	
Email:	Website:	
Physical Location: (addre	ss) WHERE PRODUCT IS I	MADE, BAKED, OR GROWN:
LIST ALL PRODUCTS/ C make it, bake it, or gro		andate requires that YOU
**Please attach photos if y market season. **	our product has not alread	y been approved for the 2022
	9	wer as there are limited spaces
<u>Table Fees:</u>		
8ft. Table for RFCM Mem	bers (\$35.00 per table)	
X \$	Table coverings are manda	tory
<u>OR</u>		
8ft. Table for NON-RFCN	I Members (\$45.00 per tal	ole)
	Table coverings are manda	
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Yendors must stack their tables & chairs after the event. (\$5 non-compliance fee will be charged)			
Pay by: cheque e-transfer			
If paying by e-transfer: revelstoke.market@gmail.com			
Please mail completed form and cheque to:	Revelstoke Farm & Craft Market P.O. Box 2814 Revelstoke, BC, VoE 2So		
No emailed applications will be accepted			
FEES MUST ACCOMPANY APPLICATION TO RESERVE SPACE APPLICATION DEADLINE: October 10th, 2022. *Refunds will not be issued after this date*			
There will be a prize for the best "Christmas Theme" decorated table			
Agreement of Compliance:			
I, (print name) have Revelstoke Farm and Craft Market (RFCM) policies. I have also made myself aware of and w local regulations that apply to the production and understand that I am not covered under the RI all risks associated with vending my products. If the Revelstoke Farm and Craft Market have been information in this application is certified to be a understand that I will be expelled from the mark monies paid. I agree to respect the decision of the Society regarding my application.	cies. I agree to comply with these ill abide by all Federal, Provincial and d vending of my product(s). I FCM group insurance and solely accept further state that all products I vend at a made, baked, or grown by myself. The accurate, and if found to be otherwise, I set without recourse or any refund of		
Vendors's Signature:	Date:		