Strathmore Farmers' Market
2012
5th Annual Fall Fair Market Application

Day: **Saturday October 6th, 2012**

Location: **Strathmore & District Ag-Society Grounds (Quonset)**

Time: 11:00 a.m. – 3:00 p.m.
Set Up time is between 9 a.m. – 10:30 a.m.
No Selling before 11 a.m. (Except discretely to other Vendors)
NO PACKING UP your space before 3 p.m. **No exception**
There will be **No Trading of Table Spaces** amongst Vendors.

Table Space Fee: **$20.00 (includes GST) Per Table Space**
Indoor Spaces are 6'wide x 8' deep. A table and 2 chairs are provided. Vendors must provide their own table linens.
Outdoor Spaces are 10' wide X 10' deep. Vendors must supply their own tent, table, chairs, extension cords etc. and be prepared for any weather changes.

Payment must be enclosed with this Application.
Violators of any of the above rules may be refused to sell at future Markets.
Vendors will be contacted if there is a **"Concern"** with their application or payment.
Otherwise the applicant is accepted into the Market.

Name:_____ Company Name:_____

Mailing Address: _____
City/Town Postal Code
Phone: _____ Cell Phone: _____Fax: _____

Web-site: _____ E-mail Address: _____

Number of Spaces Required: _____ Do you Require Power? _____ Preferred Location?_____

LIST ALL ITEMS TO BE SOLD: _____

_____

Product can be categorized as: PRODUCT/GARDEN FOOD CRAFT OTHER

Do you Make, Bake, or Grow this product yourself? YES ___ NO _____

Please Explain where and how it is made and what help. _____

_____

Will you be selling the product yourself? YES ___ NO __ If not who will represent you? _____

Where else is your product available? List all other Markets, Retail, Consignment, Wholesale etc. _____

_____

By my signature, I declare the above information on this form complete and accurate and I agree to pay the rates set out and abide the rules and regulations. I fully understand that not all applications are granted space in the Strathmore Farmers Market and that it is the right and responsibility of the Strathmore Farmers Market Committee to decide the allocation of space.

Signature of Applicant: _____ Date: _____

Return with Cheque or Money Order to: **Strathmore Farmers Market**
P.O. Box 2457
Strathmore, AB T1P – 1K3
(403)901-0477