



SOUTH SHUSWAP CANADA DAY

PO Box 1, Blind Bay, BC V0E 1H0

Email: becomeavendor@shuswapcanadaday.com

CANADA DAY VENDOR/EXIBITOR REGISTRATION FORM 2011

2011 Theme: celebrating 25 Years with Family, Friends and Fun.

I/We wish to participate in the South Shuswap Canada Day Festivities as a Vendor/Exhibitor participant and agree to the following:

HOLD HARMLESS CLAUSE:

In consideration of the acceptance of the right to participate, participants, by execution of this form, release and discharge the South Shuswap Canada Day Society, all the sponsors, and as applicable, their officers, directors, employees, agents, representatives and servants, and anyone else connected with management or presentation of the South Shuswap Canada Day from any and all known or unknown damages, injuries, losses, judgment, and/or claims from any cause what-so-ever that may be suffered by any participant to his person or property. Further, each participant expressly agrees to indemnify all of the forgoing entities, firms, persons, and bodies of and from any and all liability, including attorney's fees, occasioned or resulting from the conduct of the participants or any person assisting or co-operating with the participant and under the direction or control of participant. The promoters will do all in its power to cooperate with participants to ensure a successful event. We ask that you please do the same. Kindly observe all Provincial and local ordinances, all safety and traffic regulations, safety rules and fire ordinances. By signature here to, I (we) acknowledge that I (we) have read and agree to all the rules and conditions of the South Shuswap Canada Day Society and rules governing the South Shuswap Canada Day as set forth on this form, and I (we) agree to observe all rules and decisions of the event promoters.

PLEASE READ THE ABOVE CAREFULLY, SIGN then return this form to the registration personnel.

Signature: _____ **Name:** _____

Applicant Contact Information (Please Print Clearly)

Business Name: _____

Type of Business: (Please Circle) Food Retail Display

Non Profit: Yes / No

Contact Name: _____

Mailing Address: _____

Phone: _____ Best time to call: _____

Email address: _____

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Description of Product or Service

Each Vendor / Exhibitor is responsible for providing their own power, water, and any chairs, tables or necessary equipment including tents that they require.

Set up must be completed before 9:30 am due to parade route road closures.

Booth Space 10' x 10' cost \$25 – (if larger space required please email coordinator) No Cost for Registered Non-Profit / Charity. Costs are kept at a minimum to allow maximum participation. Donations are greatly appreciated if sales at the event are profitable.

- Proof of Liability Insurance required.**

Acknowledgment and Certification

I accepted the above the above stated conditions & do not hold the South Shuswap Canada Day Society, its members & volunteers legally responsibility for any loss, damage or theft incurred by myself, my employees or my goods & equipment during the event. I understand that health and safety inspections may occur during the event & that I need to have all requirements in place.

Signature: _____ Date: _____

Make cheque payable to “South Shuswap Canada Day Society.”

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For Office Use Only
