



TEMAGAMI CANOE FESTIVAL – JULY 17-19, 2015
VENDOR APPLICATION FORM

PLEASE PRINT CLEARLY AND BE SURE TO SIGN THE BOTTOM OF THE FORM

Business Name: _____

Contact Name: _____

Address: _____

Postal Code: _____ Telephone: _____

Email: _____

Product Description: _____

(You are responsible for collecting and remitting sales tax if applicable)

SPACE ON WATERFRONT – WEEKEND RATE (July 18 (10-6) & July 19 (10-4))

Number of 10' x 10' spaces required _____ x \$40.00 = \$ _____ (maximum of 2 adjoining booths only)

Number of tables required? _____ Hydro required? YES / NO (hydro availability is limited) (Circle one)

DEADLINE FOR PAID ENTRIES IS JULY 3, 2015. Applications will be accepted on a first come first serve basis and will be positioned on the Temagami Waterfront in the same manner. Space is limited – **please make contact first by calling Carolyn at 705-569-2904.**

To the Temagami Canoe Festival Committee:

I, the Lessee shall save and hold harmless “The Municipality of Temagami” and the “Temagami Canoe Festival Committee”, their members, agents and employees from any and against all claims, demands, losses, costs, damages, actions, suits or proceedings by any third party that may arise out of or, or may attribute to, all operations performed by or carried out by the Lessee, his/her agents, employees or servants, or anyone for whose acts he may be liable, howsoever caused. I, the undersigned, agree to the above stated.

Printed Name: _____

Vendor Signature: _____ Date: _____

Cheques made payable to “**Carolyn Laronde**” (NOTE: **Post-dated cheques will not be accepted**)

Please mail your **signed vendor application form and payment to:**

Temagami Canoe Festival, c/o Carolyn Laronde, PO Box 482, Temagami, Ontario P0H 2H0