48th Annual St. Mark’s Fair

##### Saturday, July 25, 2020

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| **Registration Form:** complete and mail, *with payment*, to: | *Office use* |
|  | St. Mark’s Fair138 Hoylake Road WestQualicum Beach, BC V9K 1K3 | *Date received:**Date paid or p/d:**Amount paid:**Receipt given:* | *Yes / No* |
|  | ***Renewal:*** | ***Previous Stall*** |  |  | *2020 Stall #* |  |
|  |  | ***Note: reserved for you until April 30th only!*** |  |  |
| **✓** | ***New*** exhibitor or unable to attend in previous year. |  |

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| ***Application Details*** | **#** | **$** |
| **1)** |  Preferred stall or price range (refer to supplied site plan for pricing) *Note: we offer a limited number of stalls at a 60% rate (40% discount) for Registered Charitable Organizations. If qualified, please supply your registration number here:*  |  |  |
|  |  |  |  |  |  |
| **2)** |  8’ Table(s) required at $20 each (if you are unable to supply your own): |  |  |
| **3)** |  Extra Parking Permit for $5 (one is included in stall rental fee): | (max 1) |  |
| *Total payment enclosed (cheque or money order payable to St. Mark’s Church):* |  |
| 4) Please complete or revise the following information, as applicable: |
| Name of Organization: |  |
| Contact Person’s Full Name: |  |
| Mailing Address: |  |
| City, Province, Postal Code: |  |
| Phone / Alternate Phone: |  |  |
| E-Mail Address: |  |
| Exhibit Details (What you are Selling/Displaying): \*incomplete application may be rejected\* |
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I understand that this application may be placed on a waiting list. If space is not available, I will receive a full refund. I also acknowledge that the St. Mark’s Fair Committee determines the location of all activities on the site and reserves the right to relocate or remove any vendor at any time in the interests of ensuring a good event. I/we have noted, and accept as a condition, the policies set out in the ***Policy Information Sheet***.

 ***\*unsigned application may be rejected\****

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| Signature: |  | Date: |  |