Silver Bells Winter Markets 2017

Registration Form

Business Name: Click here to enter text.

Contact Name: Click here to enter text.

Contact Phone Number: Click here to enter text.

Address: Click here to enter text.

City, Province, Postal Code: Click here to enter text.

Email: Click here to enter text.

Facebook Page: Click here to enter text.

Website: Click here to enter text.

**I am registering for:**

|  |  |  |
| --- | --- | --- |
| [ ]  **Camrose November 24 – 26, 2017***in conjunction with the Festival of the Trees*Camrose Regional Exhibition4250 Exhibition Drive, CamroseTentative Times: TBA  | **$440.00** | 10X 10 Booth/6-foot table/2 chairs/power |
| Camrose Payment Option: Non-refundable Deposit; remainder due September 1 | **$100.00** |  |
| [ ]  **Sherwood Park November 24 – 26, 2017***With the Winter Wonderland Festival*Agora Room/Community Centre401 Festival Lane, Sherwood ParkFriday: 12 – 8, Saturday 10 – 5, Sunday 11 – 4  | **$375.00** | 6-foot table/2 chairs |
| Sherwood Park Payment Option: Non-refundable Deposit; remainder due September 1 | **$75.00** |  |
| [ ]  **Spruce Grove December 2, 2017**Gym, TransAlta Tri Leisure Centre221 Jennifer Heil Way, Spruce Grove10:00 am - 5:00 pm | **$160.00** | 6-foot table/2 chairs |

**Please describe all the items you would be selling at the market:**

Click here to enter text.

**Special Requests (power-(limited)/wall space-(limited)/racks/extra table etc):**

Click here to enter text.

While we will make every attempt to meet special requests, please understand that we are limited to the resources of the room as well as ensuring a functional layout. If we are NOT able to meet your request for either, we will ensure that we advise you.

Date Received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Invoice #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Deposit:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Reminder Sent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_Paid in Full:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Disclaimer: The coordinators make no guarantees for vendor sales or patron attendance. The Exhibitor understands that the event will be advertised in public areas, through social media, and general advertising, and gives permission for the use of their business information to promote the event.**

[ ] I would like to be invoiced for the non-refundable deposit and pay the remainder by September 1, 2017

Date: Click here to enter a date.

Signature: Click here to enter text.

**Payment will be requested by *invoice* upon acceptance. Do not send until contacted. Thank you!**

**Payment options:**

[ ] **Visa/MC**

[ ] **EMT to (silverbellswintermarket1@gmail.com) password: 2017Markets**

[ ] **Cheques-(only accepted prior to November 1, 2017)**

**Mail to: 1 Market Street, Sherwood Park AB T8A 0T5**

**REMINDER: REGISTRATION IN THE MARKET IS NOT CONFIRMED WITHOUT PAPERWORK AND FULL PAYMENT.**

**Photo/Video Release:** I hereby give the Silver Bells Winter Market permission to use photographs and video images of myself for marketing and communication purposes such as but not limited to, advertising, promotions, displays, websites, newsletters and brochures for the promotion and conveying of information pertaining to the Silver Bells Winter Market. Please be advised names will not accompany any use of photos or video clips without permission. Photographs and video of large groups of participants may be posted on our websites without permission as long as individual participants are not singled out or identified in any way. Please choose one appropriate choice:

[ ]  Permission is granted to use photographs/video of myself on the Silver Bells Winter Market or affiliate Websites and promotional materials given the guidelines stated above.

[ ]  Permission is **not** granted to use photographs/video of myself on Silver Bells Winter Market or affiliate Websites and promotional materials given the guidelines stated above.

Name of Participant: Click here to enter text.

 Date: Click here to enter a date.