



Niverville Olde Tyme Country Fair

Box 840
Niverville, MB
R0A 1E0
www.nivervillefair.com

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Street Market Coordinator

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TRADE SHOW/CRAFT SALE APPLICATION FORM

APPLICATION DEADLINE - MAY 25, 2009

Company Name/Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Contact Person: _____

Phone: _____ Fax: _____ Email: _____

Website: _____

Booth Length (ft.): _____ Booth Width (ft.): _____

NOTE: Please be accurate to include hitch, bumpers, tanks, awnings, etc. Oversized booths will require additional 10 foot space.

NEW THIS YEAR! OPEN FRIDAY NIGHT TO CRAFTERS

Street Space Classification (Check One)

Information (No Selling)

- Craft Sales Food Sales Other
- Trade Sales Food Sales (pkg foods only eg: Watkins etc...) Other

Friday and Saturday \$150.00 (MUST BE PRESENT BOTH DAYS)

Saturday only \$100.00

NOTE: Booth space is sold in 10 foot intervals, the fee covers one 10 foot space. Over 10 feet, price is negotiable.

Wristbands Required: _____

(Two wristbands per application. Additional wristbands must be purchased for \$10 each.. Please ensure all persons have a wristband)

Hydro Service - 120 Volt only (Check one, Limited Availability)

- No Hydro Hydro - \$20

• No Generator Service • No Table Service

Product or Service being Exhibited (Supply detailed list of goods to sell and/or information to distribute. List all foods to be sold if applicable)

PLEASE NOTE: full payment must be submitted with this application form, however it does not guarantee space. If for some reason your application is denied, a full refund will be issued. There will be no refunds for cancelled space. By signing this application the exhibitor agrees to allow their contact information to be released and used for advertising. If you do not want your information released please check the box below. Niverville Fair Committee reserves the right to deny any application for any reason. We are not liable for losses due to theft, fire, weather, or any other causes. Therefore please arrange for your own insurance.

No, I do not want to release my contact information

Signature: _____ Date: _____

For more information contact:

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