



Market

**Friday, November 24th, 2017
(3:30 p.m. – 8:30 p.m.)**

Vendor Registration Form

Business Name: _____ **Contact:** _____

Mailing Address: _____ **Town/City:** _____

Postal Code: _____ **Phone #:** _____ **E-mail Address:** _____

What do you sell? _____ **How many tables will you need?** _____

FEES: \$20.00 for one table and two chairs; \$10.00 for each additional table or space for rack. Only 30 tables available on a "first-come, first-serve basis". Payment, in the form of cash or cheque, can be dropped off at the Coaldale & District Chamber of Commerce (1401 – 20 Avenue).

Permission, Media Consent & Waiver

The undersigned grants to the Coaldale & District Chamber of Commerce the right and permission to use pictures, film footage and interviews of my/our group for the purpose of promoting the 2017 Country Christmas Night of Lights festivities.

The undersigned acknowledges:

1. that we/I have read and understand the Registration Form and Terms and Conditions and shall abide by the terms thereof;
2. that neither the Town of Coaldale nor the Coaldale & District Chamber of Commerce or any agent, employee or volunteer thereof shall assume or incur any liability and/or responsibility for any personal injury, property damage, costs, expenses or claims suffered/incurred in any way related to this event and/or our/my participation therein and we/I hereby release and hold harmless such parties from any such injury, damage, costs, expenses or claims.

Vendor Signature _____ **Date** _____

**For more information, please contact:
Coaldale & District Chamber of Commerce
Phone: 403-345-2358
Email: info@coaldalechamber.com**

For Event Use Only:

Vendor Space Number: _____

Payment Received: \$ _____ **Date** _____ **Receipt Issued:** _____

