



CORYDON COMMUNITY CENTRE



2019 River Heights Farmers' Market Vendor Registration Form

Name of company: _____

Your name: _____ Ph number: _____

Email address: _____

Brief description of products carried:

Full mailing address: _____

Alternate contact name / phone number / email: _____

Stall Information: Stalls are approximately 10 ft by 10 ft. If you require more than one stall (or more space) this must be communicated at time of application and is subject to availability. Additional charges may apply.

I have read the Contract and Registration Form and agree to abide by the General Information, Market Fees, and Market Rules.

Signature of primary contact: _____ Date: _____

****PLEASE SUBMIT A BRIEF PRODUCT/COMPANY DESCRIPTION AND SOME IMAGES AT TIME OF APPLICATION FOR USE IN PROMOTION (WEBSITE, FACEBOOK, AND INSTAGRAM)***

For office use only:

Date Contract Received _____

July/Aug/Sept _____ July/Aug _____ Casual _____ Participation Fee _____

Casual:

Date _____ Date _____ Date _____ Date _____

Date _____ Date _____ Date _____ Date _____

Additional:

i. _____ ii. _____ iii. _____ iv. _____

Total Received for 2019 \$ _____

SIR JOHN FRANKLIN
1 Sir John Franklin Road

RIVER HEIGHTS
1370 Grosvenor Avenue
(204) 488-7000

CRESCENTWOOD
1170 Corydon Avenue