



Westside Celebration Society

#4, 2375 Pamela Road
West Kelowna, BC V4T 2H9



www.westsidedaze.com E-mail: westsidedaze@gmail.com

CONCESSION OPERATORS FORM

July 1st to 4th, 2010

Johnson Bentley Memorial Park

CONTACT: _____

ADDRESS: _____

POSTAL CODE: _____ PHONE/CELL: _____

TYPE OF EXHIBIT: _____

DESCRIPTION: _____

RATES

\$125.00 PER DAY or \$250.00 FOR 4 DAYS (must commit to 4 days for special rate)

Spaces are available in a 10' x 15' area. Please note that spaces are limited

Number of Spaces Required: () 10' x 15' @ \$125.00/day \$ _____

Days required: Thurs Fri Sat. Sun.

OR

Number of Spaces Required: () 10' x 15' @ \$250.00/4 days \$ _____

TOTAL (no GST) \$ _____

Signature

Make cheque payable to: **Westside Celebration Society**

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Concession
Operators Form

Space will be confirmed upon receipt of payment and Permit. If Permit is not available at the time of faxing the Application, your spot will be held **until May 30th** pending receipt of the Permit. If not received by that time your spot will be given to another vendor.

SET UP TIME: July 1 – Thursday – set up by 8:30 am

(Show 'n Shine vehicles arrive at 9 am)

JULY 3 – Saturday – Setup by 10:00 am (Parade in the morning)

(We anticipate having overnight security each night)

- ◆ **Power, Water, Table or Chairs** will **NOT** be supplied; you must supply your own.
- ◆ A “Food Court”, with tables and chairs will be supplied for the benefit of all concessions.
- ◆ If food is being served, it is the responsibility of the vendor to obtain a Short Term Premise Permit from Interior Health Authority: www.interiorhealth.ca click on “Health and Safety”, then “Food Safety” then “Temporary Food Vendors”
- ◆ We cannot guarantee you will be the only vendor selling that particular product.

If accepted, I agree to abide by the conditions, which have been provided with this Application, and acknowledge that in the event of a dispute, ruling of the Show Manager will prevail. In consideration of my participation in this showcase, I hereby agree to hold free from any and all liability the Society and its respective officers, and members and waive, release and forever discharge any and all rights and claims for damages which may or which may hereafter accrue to me arising out of or connected with my activities with The Westside Celebration Society.

Exhibitor’s Signature

_____, 2010
Date

For any further information please **CALL Adrienne at (250) 769-0793**

**FAX Application & Permit to: (250) 769-3117 or
Mail to our address above**