



Vendor Form

Business name _____

Business address street _____

community _____ postal code _____

Business website _____

Days and times you will be participating _____ hours

Friday ☐ _____

Saturday ☐ _____

Sunday ☐ _____

Please provide a short description of your offerings (fewer than 50 words) for use in the brochure

Contact name _____

Phone number main _____ mobile _____

Email address _____

Fee is \$90

You can pay

by e-transfer to **SeasideChristmasNS@gmail.com** (changed from last year),
by sending a cheque with your application form to the address below (also changed from last year), or
by dropping off the form and cheque or cash to Catherine at 93 Riverside Ave, Musquodoboit Harbour

Signature _____

Date _____