



Crafter Form

Business name _____

Business address street _____

community _____ postal code _____

Contact name _____

Phone number main _____ cell _____

Email address _____

Please provide a short description of your offerings

A table in the Old School will be provided on Friday, Saturday and Sunday

Fee is \$60

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 _____

Please note our new email address

P.O. Box 206
Musquodoboit Harbour, NS, B0J 2L0

email: SeasideChristmasNS@gmail.com
website: SeasideChristmas.ca