



The Pickering Markets

and Trade Centre

...never a dull moment!

APPLICATION/CONTRACT
The Pickering Markets
(hereinafter referred to as the "Market")

BOOTH NUMBER(S): _____

VENDOR SPACE APPLICATION FORM AND CONTRACT

BETWEEN PICKERING MARKETS INC. (the "Owner"), and MANAGEMENT GROUP LIMITED
(the "Management")

AND

COMPANY NAME: _____ (hereinafter referred to as ("Vendor"))

CONTACT: _____

STREET ADDRESS: _____

CITY/PROVINCE: _____ POSTAL CODE: _____

TEL. NO.: () _____ FAX NO.: () _____

E-MAIL: _____

USE CLAUSE / TYPE OF MERCHANDISE (be specific): _____

VENDOR ACCEPTANCE:

I/We have read and will abide by the Terms of Agreement outlined on the reverse side of this
Application/Contract, and any other terms the the Management may choose to add.

Vendor's Signature

Date

Management's Signature (on behalf of Owner)

Date

For Office use only:

Start Date: _____

Payment received: YES ___ NO ___

Accepted by: _____

Amount: \$ _____

Date: _____

Cash: ___ Cheque No.: _____

Monthly Booth Fee: \$ _____

Receipt No.: _____ Date: _____