



PICKERING MARKETS

APPLICATION / CONTRACT

VENDOR SPACE APPLICATION FORM AND CONTRACT

The Pickering Markets
(Hereinafter referred to as the "Market")

BOOTH NUMBER(S): _____

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

AND

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

NAME: _____

STREET ADDRESS: _____

CITY / PROVINCE: _____ POSTAL CODE: _____

TEL. NO.: () _____ CELL NO.: () _____

E-MAIL: _____

DRIVERS LICENSE NO. _____ COPY ATTACHED: Y / N

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, Rules and Regulations, and any other terms that the Management may choose to add.

Vendors Signature

Date

Management Signature (on behalf of the Owner)

Date

FOR OFFICE USE ONLY:

Start Date: _____

Payment Received: _____

Accepted By: _____

Amount: \$ _____

Date: _____

Cash: _____ Cheque No.: _____

Weekly Booth Fee: \$ _____

Receipt No.: _____ Date: _____

Damage Deposit: \$ _____