

PERTH FESTIVAL OF THE MAPLES SATURDAY, APRIL 26, 2025 **BOOTH APPLICATION FORM**

NON-Chamber Member

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Vend	ors	and	Exh	ibito	ors

Office Use Only:				
Rec'd:				
Booth #				

Business Name:				
Contact Name:				
		City		
		City:		
Province:	Postal Code:			
Telephone: (Day)		Cell:		
Email Address:				
Booth Size (Depth: 10 ft.)	Length:(20	t. maximum) Height:		
Description of products to be solo	d, exhibited:			
CATEGORY/D	ESCRIPTION	NON-MEMBER FEE		
A. Food Vendors – Burgers fries, sandwiches, etc.		Amount = \$335.00 + HST = \$378.55		
B. Snack Vendors - Home b	paking, snack food	Amount = \$190.00 + HST = \$214.70		
C. Regular Vendors - Comn	nercial businesses	Amount = \$190.00 + HST = \$214.70		
D. Non-Profit Groups - NO organizations only	SALES - for charitable	Amount = \$155.00 + HST = \$175.15		
I require # of booth space(s) @ \$ = TOTAL \$ (Including HST) Payment: Credit Card: VisaMC Number:				
Expiry:	/ CVV #:			
E-Transfer: accounts@perthchamber.com Use Password: Maplefest Confirm#: Date Sent:				
NOTE: Please indicate the name of your business/booth on your e-transfer and all correspondence.				
By Cheque: (Payable to Perth & District Chamber of Commerce - No post-dated cheques please)				
INITIAL HERE that you have READ AND AGREE to the VENDOR GUIDELINES of the FESTIVAL of the MAPLES. Your application will not be considered without this approval. Vendor Guidelines are available on the festival website at: festivalofthemaples.com				

Please download and complete this Application form, scan and email to the address below. Send 'Proof of Insurance' by email no later than March 28th, 2025. Insurance info in Vendor Guidelines.

(Gore St. & Foster St. businesses must CONFIRM 'In-front-of-store' applications by Feb. 14th)

Perth Chamber office phone: (613) 267-3200 Email: maple@perthchamber.com

Perth Festival of the Maples - 40 Sunset Blvd., #30, Perth, Ontario K7H 2Y4