

Vendor Application

REGISTRATION APPLICATION TWO WHEEL SUNDAY MOTORCYCLE ASSOCIATION

GROUP or VENDOR WEBPAGE/FB LINK CONTACT NAME #1 MAILING ADDRESS PC				
EMAIL ADDRESS PHONE				
CONTACT NAME #2 EMAIL ADDRESS PHONE				
NUMBER OF SPACES REC	QUESTED (3 Maximum)			
Suggested donation Per Site. ie. # of SITES X \$75/\$100= \$ FOOD TRUCK (\$150 Fee) YES/NO				
Etransfer donation to <u>Treas</u>	ay 15) * \$100 PER SPACE (After May 15) urer@TwoWheelSunday.com 4-225 Berwick Dr NW, CALGARY, T3K 1P6			
VENDOR: TYPE OF BUSIN MOTORCYCLE CLUB/GRO REGISTERED CHARITY YI MOTORCYCLE SHOP YES	OUP YES/NO ES/NO			
OTHER (DESCRIBE)				

Vendor Requirements

- Provide a link to a website for reciprocal promotions.
- Submit valid Insurance min. 30 days prior to event
- Setup time 7am to 9am on the day of the event.
- Set up must be completed by 9:15am and set-up vehicles removed to nearby offsite parking.
- Sites will be assigned based on availability, once all registrations are received.
- Each space will accommodate a 10ft X 10ft Canopy.
 - ANCHORS FOR CANOPY each corner must have 40 lb. anchors (sandbags, pails of water, etc)
 - Canopies must have fire-retardant s109 rating
 - City inspectors will check the sites and will not allow any canopies without anchors.
- No chairs, tables, tents or weather coverings are provided.
- No power available.
- Motorcycle-only parking allowed on site during the event.
- All registrants must clean up their area and dispose of all garbage by the end of the event.

Email completed registration form to: <u>Treasurer@TwoWheelSunday.com</u> Registrations not confirmed until payment received - details below

Payment Method VISA MASTERCARD CHEQUE (made payable to) Cardholder Name (as it appears on the card) Card Number Expiry / MM/YYYY CVV SIGNATURE: POSITION: DATE:	□ I would like to make an additional cash / prize donation for the event (\$, gift certificates, event tickets, merchandise, etc.) Volunteering time, is also considered a donation for this event.				
UISA MASTERCARD CHEQUE (made payable to) Cardholder Name (as it appears on the card) Card Number Expiry / MM/YYYY CVV SIGNATURE:	□ Total value				
Cardholder Name (as it appears on the card) Card Number Expiry / MM/YYYY CVV SIGNATURE:		Payment Method			
Card Number Expiry / MM/YYYY CVV SIGNATURE:	UISA MASTERCA	RD □ CHEQUE (made pa	ayable to)		
SIGNATURE:	Cardholder Name (as it appears on the card)				
	Card Number	Expiry / MM/YYYY	CVV		
POSITION: DATE:	SIGNATURE:				
	POSITION:		DATE:		

Etransfer donation and application to Treasurer@TwoWheelSunday.com