



WICKED VICTORIA VENDOR APPLICATION FARM VENDOR

When you fill out the application, please fill out the following information as accurately as possible. Applications with missing or vague information will not be accepted. For more information concerning vendor applications contact the Greater Victoria Festival Society Executive Director at 250-382-3111

Contact Information

Name: _____

Business Name: _____

Street Address: _____

City: _____ Postal Code: _____

Phone: _____ Mobile: _____

Email: _____

Cost: \$100.00 Please make cheque payable to Greater Victoria Festival Society

Additional Contact Information

If you will not be onsite for the event, you may add an additional name for event day contact purposes only.

Event Contact's Name: _____

Event Contact's Mobile Number: _____

Event Contact's Email: _____

Vendor Information (Please include a copy of your VIHA Certificate)

What do you wish to sell?

Do you make or grow everything that you wish to sell at the Wicked Victoria Harvest Festival?

Where do you grow or make your products?

Do you adhere to the Canadian Organic Standards?

- Yes
- No

Marketing & Advertising

Vendor profiles may be featured in the GVFS social media or websites, or on our media partner's social media or websites. In 200 words or less, describe yourself and your product. Please include additional social media links below.

Facebook _____

Twitter _____

Website _____

Images

Optionally, you can send us up to 3 images of your product(s). Send by email to gvfsvic@gmail.com

Permission and Privacy

The Greater Victoria Festival Society does not sell, rent, or provide personal information without your express permission.

Do we have permission to:

(please check to box to indicate yes, leave unchecked box to indicate no)

- Add your contact information to our contact list for Greater Victoria Festival Society community events & updates on our website www.gvfs.ca.

- To use photos of you taken at the Market for our website and publicity, use in marketing & public relations & advertising collateral to help publicize & raise awareness of the Community Centre & Association & BC Association of Farmers' Markets (BCAFM).

Participation Agreement

Your electronic signature below indicates that you have read and agree to abide by all the policies outlined in the xxx. You acknowledge and agree that is it your responsibility to read and abide by all Festival rules and regulations, and read and uphold any updates to the Policy Manual. **Your electronic signature below also indicates that the information you provide in the Farm Vendor Information Form to the Event Manager is accurate and complete.**

Name: _____

Date: _____