

TOWN OF TABER <u>Taber's 2nd annual Health & Wellness Expo</u> <u>Vendor Application / Contract</u>

Please Coordinate Arrangements through the ACE Coordinator located at the Civic Center (403-223-6013)

Complete and return Fitness Expo Vendor Application form to the Town of Taber office no later than May 26th, 2022.

Business Overview:				
Business Name:				
Address:				
Phone:				
Email:				
Event day contact:				
Event day phone:				
Booth Description; how is this bugifts):	siness related to health, wel	llness or fitness? (Include any	give-away items, sale	items, and
Would you like to do a demo or a Describe your demo or talk (indices of the second of	cate # of participants, length		upplies required/bein Tota	
20 X 10				
TOTAL	\$40.00		\$ \$	
TOTAL	EX'	TRAS	Ψ	
EXTRA	Price	# Required	Tota	પ <u></u>
POWER (VERY LIMITED)	\$0.00	•	\$	
EXTRA FOLDING CHAIR(S)	\$0.00		\$	
EXTRA FOLDING TABLE(S)	\$0.00		\$	
TOTAL	· -	-	\$	
			•	
	TC	OTAL		
TOTAL	Price	# Required	Tota	ıl
ВООТН	-	-	\$	
EXTRAS	-	-	\$	
TOTAL	-	-	\$	
Date:		Signature:		