



**Chemainus + District  
CHAMBER OF  
COMMERCE**

102-9799 Waterwheel Crescent  
Box 575, Chemainus, BC V0R 1K0  
Phone: 250-737-3370 Fax: 250-246-3251  
Email: chamber@chemainus.bc.ca  
Website: www.chemainus.bc.ca



Name: \_\_\_\_\_

Business (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_

City|Town: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Website: \_\_\_\_\_ Facebook: \_\_\_\_\_

**Description of products that will be sold**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Vendors selling or handling high risk foods are required to submit an application to Island Health. If you are selling high risk foods, you must submit a copy of an approved Temporary Food Market Application from the local health unit and include an updated Food Safe Certificate with your application.

**GENERAL VENDOR**

Vendors who are not Chamber members or merchants of Saltair, Chemainus, Thetis Island or Crofton

**\$35 + \$1.75<sub>GST</sub> = \$36.75**

**CHAMBER MEMBER**

Members of the Chemainus + District Chamber of Commerce in good standing

**\$20 + \$1.00<sub>GST</sub> = \$21.00**

**COMMUNITY MERCHANT**

Merchants who operate businesses or are residents of Saltair, Chemainus, Thetis Island or Crofton

**\$25 + \$1.25<sub>GST</sub> = \$26.25**

**NON-PROFIT**

Charitable organizations, non-profits and institutions

**\$25 + \$1.25<sub>GST</sub> = \$26.25**

GST is additional and is a tax deductible business expense.

**Payment – Please include your business name in the memo section if paying by e-transfer or cheque. E-transfers should be sent to chamber@chemainus.bc.ca.**

E-transfer

Cheque:

Attached

Mailed

Will pay in person @ Visitor Centre

**Privacy and Consent**

Vendors are solely responsible for their products, equipment, and other possessions, and for their business practices. By making application to the Chemainus + District Chamber of Commerce Giant Street Market for vendor status, the vendor agrees to indemnify and save harmless the Chamber, its directors, employees, and agents, from any loss incurred by the vendor, or from any action or claim of any nature made by any person.

I, \_\_\_\_\_ :  
(print name)

hereby consent to the collection, use, and disclosure of my personal and business information provided in this form. I understand and agree that this information, and photographs taken of myself and my vendor stall, may be disclosed to the public and to the media by the Chemainus + District Chamber of Commerce, and may be included in publicly disclosed committee and board reports, agendas, and on the Chemainus + District Chamber of Commerce's website, and social media platforms.

hereby consent to the use of the email address listed above for commercial electronic message and communication purposes from the Chemainus + District Chamber of Commerce.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_