



**Chemainus & District Chamber of Commerce**

Box 575, Chemainus, B.C. V0R 1K0

Phone: 250-246-3944 Fax: 250-246-3251

Email: [chamber@chemainus.bc.ca](mailto:chamber@chemainus.bc.ca) Website: [www.chemainus.bc.ca](http://www.chemainus.bc.ca)

**2019 CHEMAINUS WEDNESDAY MARKET BUSKER APPLICATION**

**(May 22 – September 18, 2019 | 10AM-3PM | Waterwheel Park)**

The purpose of the Chemainus Wednesday Market is to provide a venue for the sale of **local** and **regional (Vancouver Island and the Gulf Islands)** farm produce, flowers, baked goods, sweets, and crafts. This is a make it, bake it, grow it market that operates rain or shine. **We are seeking musicians and entertainers to add value, and perform at our Market. Set-up: 8.00 am – 10:00 am | Take-down: 3:00 pm – 4:00 pm**

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

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

City/Town: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

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

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

Please list the types of music/activities that you will be performing.

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

Please list your preferences of dates/times to provide entertainment for the Wednesday Market.

\_\_\_\_\_

Please read and sign below, indicating your agreement:

**Buskers are solely responsible for providing their own supplies during market season (i.e. tents, musical equipment, etc).** We will review all submitted applications, and contact you regarding the 2019 Busker Schedule.

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 busker 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.

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

Please return completed application to the Chemainus Visitor Centre

By Post: Box 575, Chemainus, BC, V0R1K0 | By Fax: 250-246-3251 | By Email: [visitorcentre@chemainus.bc.ca](mailto:visitorcentre@chemainus.bc.ca)