WEST KELOWNA CAR SHOW

2024 Exhibitor / Vendor Application

(PLEASE PRINT)

Business Name: _			
Vendor/Contact N	lame:		
Mailing Address:	City:		
Postal Code	Phone:	Cell:	
Email:		Website:	
	Merchandise Ver Cheques made payal	rs/Food trucks - \$150.00 ndor – 10' x 10' Stall - \$100.00 ple to West Kelowna Car Show o tkelownacarshow@gmail.com	r
*** Fc	ood vendors must have a b	usiness license for City of West	Kelowna ***
For additi	onal space or special requi	rements, refer to the contact info	ormation below:
Plea	se mail cheque, application	n and proof of insurance by April	30 th , 2024
PLEASE S	SPECIFY ALL INDIVIDUAL P	RODUCTS YOU INTEND TO SELL	AT THIS EVENT
Exhibitor / Vendo	r Signature		

Contact Information: Pam Cunningham 250-317-1125
Mailing Address: West Kelowna Car Show, Box 1104, Peachland, B.C., V0H 1X0

