



MARKET PLACE & EXHIBITION

Exhibitor/Vendor
2018 Registration Package



Exhibitor Guidelines

When:

August 24th to 26th, 2017

Exhibitors Hours:

New This year, the Ontario Fur Managers Federation and the Timmins Fur Council are hosting the “Rendez Vous” 2018 conference from the Great Canadian Kayak Challenge & Festival. They are expecting upwards of 1,200 delegates / family to attend. The Steering Committee adjusted the festival hours to capitalize from this incremental traffic through the park.

Inside the Marketplace Tent

Friday 4 p.m. to 9 p.m., Saturday 9 a.m. to 9 p.m., Sunday 9 a.m. to 6 p.m.

N.B. Exhibitors will be given notification one half hour before closing time followed by a 5 minute warning before the tent doors are zipped up.

Outside the Marketplace Tent –

New Exhibitors who wish to remain open during the live concerts scheduled for Friday and Saturday evenings will be located outside the Marketplace Tent along Exhibitor Alley. Please ensure you identify this request on the form

Location: Mountjoy Historical Conservation Area (Participark) – Mattagami River, Timmins, ON

Deadline to register: - 4 p.m. August 17th, 2018

New ANY REGISTRATION RECEIVED AFTER AUGUST 17TH AT 4 P.M. WILL BE SUBJECT TO A LATE REGISTRATION FEE OF \$30 + HST.

Exhibitor Category & Cost:

1. Artists & Vendors:

This category applies to exhibitors selling goods or services from the park or promoting a product or service for profit.

Booth Fee: \$75.00 + \$9.75 HST / 10' x 10' space (may purchase more than one space)

2. Community Information Exhibits:

This category is for non-profit organizations or service clubs.

Booth Fee: \$40.00 + \$5.20 HST / 10' x 10' space

3. If you are selling food & beverage items, you must register using the Food Exhibitor Form.

Displays must be professional in appearance and staff/representative must be present for the duration of the event.

Equipment available:

1. Tent cover:

A 60'x 90' market place tent will be set up for vendors. A total of thirty two 10' x 10' spaces are available. Space under the tent will be assigned on a **first come/first serve basis**. All others will be assigned an outdoor space where tent cover is recommended.

If setting up **outside** the 60' x 90' market place tent you must bring and safely secure your own 10 x 10 tent cover at your assigned space, should you wish to have protection from the elements.

2. Electricity:

If you require electricity add **\$15.00**

3. Tables and chairs:

Not available. Exhibitors must provide their own.

Set up Tear Down:

Exhibitors are asked to set up between 1 p.m. and 5 p.m. on Thursday August 23rd or between 8 a.m and 4 p.m. on August 24th, 2018. Exhibitors are responsible for the set up of their own displays including equipment, tables, chairs, garbage disposal, and cleanup. Tear down of the booths will begin at 6 p.m. on Sunday Aug 26th, 2018

The organizers have hired night time security beginning August 23rd to the 26th, 2018. Despite our best efforts to secure the festival grounds, goods left overnight by exhibitors are left at their own risk.

Exhibitors who tear down before the designated time of Sunday August 26th @ p.m. will be prohibited from future participation at this event.

Ground Access:

THIS RULE WILL BE STRICTLY ENFORCED FOR THE SAFETY OF OUR VISITING PUBLIC

Vehicles will be allowed on the grassy area to load and unload only.

New

Thursday access to booth from 1:00 p.m - 5:00 p.m

Friday access to booth area 8:00 a.m. – 4:00 p.m

Saturday access to booth area 7:30 a.m. - 8:00 a.m.

Sunday access to booth area 7:30 a.m. - 8:00 a.m., and again at 6 p.m.

Parking:

VIP parking pass will be provided to all exhibitors. Parking is in the VIP lot North West corner of the park. Parking is limited therefore access to VIP lot is **on a first come first serve basis**.

Weather:

Rain or shine, the show must go on! We advise exhibitors to bring sunscreen, bug spray, hats, umbrellas, tarps, canopy, and other protective covering.

If thunder and lightning conditions occur, the organising committee may call off the activities. If this occurs, no refunds will be given.

Accommodations:

Various local hotels and resorts are supporting this festival. Participating hotels are listed at www.thegreatcanadiankayakchallenge.com

On - site Camping:

Complimentary overnight camping / RV area has also been set up at the south / west end of the park. Space is limited and will be assigned on a **first come first served basis**.

Cancellations:

Vendor cancellations will be accepted up to August 3rd, 2018 where a refund will be issued minus a \$25 administration fee. There will be no refunds for any cancellations made after August 17th, 2018.

Marketing:

An extensive marketing campaign will be launched in key markets to ensure a successful event. Pictures and/or video may be taken during the festival. These may be used in the future for marketing purposes only.

Exclusivity:

UPDATED

The organizer reserves the right to refuse any application. Location preferences are reviewed in order of acceptance and are not guaranteed. Your participation may be compromised if your on-site exhibit differs from the product outline which you provided on your application, or if your exhibit does not meet Health and Safety requirements. Registration is on a first come / first served basis. The Steering Committee aims to provide a varied selection of vendors on site at the Festival. Should there be more than one vendor selling the same BRAND of product (Avon, Scentsy, Charmed Aroma, Sengence, etc.) preference will be given to the vendor who registered first. You are permitted to sell only those items listed on your application.

Responsibility:

New All exhibitors are responsible for having personal property and general liability insurance in the amount of \$2 million. The Corporation of the City of Timmins, the Mattagami Region Conservation Authority and the Great Canadian Kayak Challenge & Festival must be added as additional insured to the policy, and a certificate of insurance must be submitted to the organizer before set-up begins.

Any damages or theft occurring to the artist's work during the transportation, set up, take down, exhibit hours, after hours and in any other matter will be the sole responsibility of the exhibitor.

MARKET PLACE & EXHIBITION

Exhibitor Registration:

A registration booth will be set up at the venue. If you have not picked up your Exhibitor Package at the Tourism Timmins office prior to arriving on site, you may pick up your Exhibitor Kit, which includes booth number, parking pass, survey, and a waiver which you must sign before 9 a.m. Friday August 24th

Other:

An ATM machine service will be available in the vendor tent as well as in the main food and beverage tent.

For more information:

Please refer the festival's website at **www.thegreatcanadiankayakchallenge.com** or contact:

Guy Lamarche – Manager of Tourism and Events, Tourism Timmins
325 Second Ave - Timmins, Ontario
705-360-2640 / guy.lamarche@timmins.ca



Registration Form

August 24th to 26th, 2018

Mountjoy Historical Conservation Area – Mattagami River, Timmins, Ontario

***Deadline to register is 4:00 p.m. August 17th, 2018**

| | | | |
|----------------------------------|--|--------------|--|
| Name/Contact: | | | |
| Organisation/ Group/Business: | | | |
| Mailing Address: | | | |
| City/Prov: | | Postal Code: | |
| Web site: | | | |
| Email: | | | |
| Telephone: | | Cell: | |

Exhibitor Requirements: Check all applicable

- 1. Artists: Booth Fee **\$75 + \$9.75 HST / 10x10** ft space and includes all three days
- 2. Vendors: Booth Fee **\$75 + 9.75 HST / 10x10** ft space and includes all three days
- 3. Community Information Exhibits: Booth Fee **\$40 + \$5.20 HST/ 10x10** ft space and includes all three days
- 4. # of 10x10 spaces required
- 5. Electricity required? **\$15** additional charge.
- 6. Prefer outside location for exhibit (option for those wishing to remain open during the live concerts scheduled Friday & Saturday evenings)

Exhibit Description:

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| |
| |
| |
| |

Method of payment:

Amount of transaction: \$ _____

Visa MasterCard Cheque Cash Money order Debit Card

| | |
|----------------|--|
| Name: | |
| Card# | |
| Security Code# | |
| Expiry Date: | |
| Signature | |

Please make cheque payable to the City of Timmins

Release of Liability:

I am aware that my or those operating my booth's picture/video may be taken and used for future tourism-related marketing campaigns Yes No

I consent to the public photos and/or videos of myself those operating my booth with no compensation for such use to be used in marketing and promotional publications by the City of Timmins or any other association who has been given permission by the aforementioned organization

Please indicate if you are insured? Yes No

Please provide proof of insurance and certificate identifying The Great Canadian Kayak Challenge & Festival, The Corporation of the City of Timmins, and the Mattagami Region Conservation Authority as additional insured.

I understand all the criteria, rules and information Yes No

I have read the participation criteria & information sheet & agree to comply with such

I am aware that participating in the activities offered by or associated with The Great Canadian Kayak Challenge & Festival exposes me to inherent risks, dangers and hazards. I freely accept and fully assume all inherent danger and hazards and the possibility of personal injury, death, property damage or loss resulting there from. I agree TO WAIVE ANY AND ALL CLAIMS that I have or may in the future have against The City of Timmins, The Great Canadian Kayak Challenge & Festival Steering Committee, the Mattagami Region Conservation Authority and their directors, officers, employees, agents and representatives from any and all liability for any loss, damage, injury or expense that I may suffer as a result of my participation in activities offered by or associated with The Great Canadian Kayak Challenge & Festival.

| | |
|------------|--|
| Signature: | |
| Date: | |

Please mail this registration form and payment to:

Guy Lamarche – Manager of Tourism and Events
Tourism Timmins
325 Second Ave Timmins, On
705-360-2640 / guy.lamarche@timmins.ca

| | | |
|----------------------|----------|--|
| FOR OFFICE USE ONLY: | RECEIVED | |
|----------------------|----------|--|

2018 ELECTRICAL REQUIREMENTS FORM MARKETPLACE/VENDOR TENT

The current fee for electricity is \$15 per electrical outlet.

- The electrician selected by the GCKC&F will have complete jurisdiction over the electrical requirements and installations.
- All electrical equipment and wiring used must conform to Electrical Safety Authority Standards and must be CSA approved - You must provide your own power bar.
- The use of power other than that provided by the site project manager or the use of power in excess of that which is contracted is strictly forbidden.
- The booth will be inspected prior to opening and any electrical equipment that has not been pre-approved will be removed - CSA Approved only - no U/I designated equipment allowed.
- **IF YOU DO NOT IDENTIFY YOUR ELECTRICAL EQUIPMENT YOU WILL NOT RECEIVE ELECTRICITY**

| EQUIPMENT FORM | | |
|--|--|-------------------------------------|
| All exhibitors are required to complete the following form, and submit it with their completed application form. | | |
| ELECTRICAL EQUIPMENT | | |
| Equipment allowed at the Marketplace Alley, Vendor Tent, & Exhibitor Booth: <ul style="list-style-type: none"> • Laptop/computer • Printer • *Television/Monitor • DVD/VHS Player • Decorative Lights • Booth Lighting – must not hamper operation of nearby booths *Televisions & Monitors and all electrical equipment that issue sound must be kept at a minimal decibel as courtesy to other booth operators and spectators | Equipment not allowed: <ul style="list-style-type: none"> • No glassware on site. (Plastic or metal ONLY!) • Stoves • NO passenger vehicles. | |
| EQUIPMENT LIST | | |
| Type of | QTY | Electrical |
| | | Voltage: Watts: Type of Plug: |
| | | Voltage: Watts: Type of Plug: |
| | | Voltage: Watts: Type of Plug: |
| | | Voltage: Watts: Type of Plug: |
| CSA Approved equipment only - no U.L. equipment ALLOWED This list will determine how many power lines you will need | | |
| YOU WILL NOT BE ALLOWED TO BRING ANY COOKING EQUIPMENT - PLEASE READ "DETERMINING PROPER POWER REQUIREMENTS" INFORMATION | | |
| The Number of power lines that I require to operate my booth safely is ___ | | |
| Signature | Date | |
| Print Name | Exhibitor Name | |
| Upon approval of application, vendor will be given a booth diagram to fill out indicating set-up and location of equipment | | |

See Next Page

POWER REQUIREMENTS

Determining the proper power requirements is crucial from the standpoint of fire hazard, safety or electrical equipment maintenance. The Electrical cords that are used at the Festival site can only handle between 1200 and 1500 watts. Too much wattage usage for a prolonged period of time can cause the insulation on the extension cords to melt. Here are some typical values for appliances (as a reference) when determining your power requirements:
CSA Approved equipment ONLY - no U.L. equipment ALLOWED

- Laptop/computer
- Printer
- Television/Monitor
- DVD/VHS Player
- Decorative Lights
- Booth Lighting – must not hamper operation of nearby booths

From these values, you can see that if two or more of these appliances are operating at the same time on the same extension cord, the circuit breaker will trip; power will be shut-off and may cause permanent damage to your equipment.

FOR ALL ELECTRICAL REQUIREMENTS – PLEASE INDICATE ANY AND ALL INFORMATION ON YOUR APPLICATION FORM!



SPECIAL EVENT PERMIT APPLICATION FORM

This application must be submitted no later than 15 days prior to any event. Completed and signed forms can be dropped off or faxed to any Porcupine Health Unit office or emailed to inspections@porcupinehu.on.ca. If you require assistance, please call the Inspection Department at (705)267-1181 (1-800-461-1818).

EVENT INFORMATION

| | |
|--------------------|---------------------|
| NAME OF EVENT: | |
| DATE(S) OF EVENT: | HOURS OF OPERATION: |
| LOCATION OF EVENT: | |

CONCESSION OPERATOR INFORMATION

| | | | |
|--|-------|--------------|-------|
| NAME OF APPLICANT: | | | |
| STREET AND MAILING ADDRESS: CITY/TOWN: | | POSTAL CODE: | |
| TELEPHONE: | HOME: | WORK: | CELL: |
| EMAIL: | | FAX: | |
| PERSON IN CHARGE OF FOOD HANDLING: <input type="checkbox"/> Same as above | | | |
| STREET AND MAILING ADDRESS: CITY/TOWN: | | POSTAL CODE: | |
| TELEPHONE: | HOME: | WORK: | CELL: |
| EMAIL: | | FAX: | |
| IS THE FOOD BOOTH RUN BY ONE OF THE FOLLOWING GROUPS? <input type="checkbox"/> Religious organization <input type="checkbox"/> Fraternal organization <input type="checkbox"/> Service club | | | |
| WILL YOU BE CLAIMING AN EXEMPTION FROM THE FOOD PREMISES REGULATION AT THIS EVENT? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |

FOOD SERVICE

| | |
|---|---|
| VENDOR SET-UP: <input type="checkbox"/> Temporary Food Booth <input type="checkbox"/> Street Food Vending Cart <input type="checkbox"/> Mobile Premise <input type="checkbox"/> Indoor Facility | |
| LOCATION OF FOOD PREPARATION: <input type="checkbox"/> On Site <input type="checkbox"/> Off Site | |
| <input type="checkbox"/> <u>IF ON SITE</u> NUMBER OF FOODHANDLERS EXPECTED TO WORK AT YOUR BOOTH: NUMBER OF CERTIFIED FOOD HANDLERS: DESIGNATED SUPPORT PERSON: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A DESIGNATED MONEY HANDLER: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | <input type="checkbox"/> <u>IF OFF SITE</u> NAME OF PREMISE: TYPE OF PREMISE (i.e., restaurant, church kitchen, community centre, etc.): ADDRESS: PHONE NUMBER: |
| WHERE WILL THE FOOD BE PURCHASED OR SUPPLIED* FROM? | |
| NAME: | ADDRESS: |
| | |
| | |

*Attach separate sheet of paper if more space is required for food suppliers.

MENU

| MENU ITEM* | TYPE OF FOOD PREPARATION (E.G., GRILLING, FRYING, BBQ, ETC.) | FOOD PRECOOKED | | FOOD COOKED ONSITE | | | FOOD STORAGE ONSITE | |
|------------|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|----------------------------|---------------------------|
| | | YES | NO | YES | NO | REHEATING | HOT 60°C (140°F) OR HOTTER | COLD 4°C (40°F) OR COLDER |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Attach separate sheet of paper if more space is required for menu items.

FOOD STORAGE/TRANSPORTATION

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| <p>HOW WILL HAZARDOUS FOOD BE TRANSPORTED TO THE EVENT? <input type="checkbox"/> Refrigerated truck <input type="checkbox"/> Insulated containers with ice <input type="checkbox"/> Thermal containers <input type="checkbox"/> Other (Please specify: _____)</p> |
| <p>WHAT METHOD(S) WILL BE USED TO MAINTAIN COLD FOODS AT 4°C (40°F) OR COLDER DURING THE EVENT? <input type="checkbox"/> Not required <input type="checkbox"/> Refrigerated truck <input type="checkbox"/> Mechanical refrigeration <input type="checkbox"/> Insulated containers with ice <input type="checkbox"/> Other (Please specify: _____)</p> |
| <p>WHAT METHOD(S) WILL BE USED TO MAINTAIN HOT FOODS AT 60°C (140°F) OR HOTTER DURING THE EVENT? <input type="checkbox"/> Not required <input type="checkbox"/> Sterno/chaffing dish <input type="checkbox"/> BBQ/grill <input type="checkbox"/> Propane stove <input type="checkbox"/> Crock pot <input type="checkbox"/> Hot plate <input type="checkbox"/> Oven <input type="checkbox"/> Steam table/unit <input type="checkbox"/> Other (Please specify: _____)</p> |
| <p>WHAT METHOD(S) WILL BE USED TO REHEAT FOOD PRIOR TO SERVICE? <input type="checkbox"/> Not required <input type="checkbox"/> Microwave oven <input type="checkbox"/> Stove top <input type="checkbox"/> Oven <input type="checkbox"/> Grill/BBQ <input type="checkbox"/> Deep fryer <input type="checkbox"/> Other (Please specify: _____)</p> |
| <p>DO YOU HAVE A PROBE THERMOMETER TO CHECK THE INTERNAL TEMPERATURES OF FOOD DURING THE EVENT? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> |
| <p>DO YOU HAVE ACCURATE INDICATING THERMOMETER(S) TO CHECK TEMPERATURE CONTROL UNITS? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> |
| <p>HOW WILL FOODS INCLUDING CONDIMENTS BE PROTECTED FROM CONTAMINATION DURING THE EVENT? <input type="checkbox"/> Food grade wrap <input type="checkbox"/> Lids <input type="checkbox"/> Pre-packaged condiments <input type="checkbox"/> Sneeze guard/shield <input type="checkbox"/> Enclosed cabinet/container <input type="checkbox"/> Other (Please specify: _____)</p> |
| <p>DO YOU HAVE RE-SUPPLY METHOD FOR ICE DURING THE EVENT? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> |

SEPARATE HANDWASHING BASIN

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| <p>IS THERE A SEPARATE HANDWASHING BASIN WITH HOT AND COLD OR WARM RUNNING WATER PROVIDED IN THE FOOD HANDLING/FOOD PREPARATION AREA? HOW MANY HANDWASHING SINKS ARE PROVIDED? <input type="checkbox"/> Yes – Fixed sink <input type="checkbox"/> Yes – Portable sink <input type="checkbox"/> Yes – Temporary sink How many sinks provided? (_____) <input type="checkbox"/> No (Please explain: _____)</p> |
| <p>DO YOU HAVE A SUPPLY OF LIQUID SOAP AND PAPER TOWELS PROVIDED FOR THE HANDWASHING SINK(S)? <input type="checkbox"/> Yes <input type="checkbox"/> No (Please explain: _____)</p> |

UTENSIL WASHING

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| WHAT TYPE OF SINK IS PROVIDED FOR UTENSIL WASHING? <input type="checkbox"/> Two-compartment sink <input type="checkbox"/> Three-compartment sink <input type="checkbox"/> None (Please explain: _____) |
| WHAT TYPE OF SANITIZER IS USED FOR SANITIZING UTENSILS? <input type="checkbox"/> Bleach <input type="checkbox"/> Other (Please explain: _____) |
| TEST STRIPS PROVIDED FOR SANITIZER? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |

POTABLE WATER SOURCE

| | | |
|---|---|---|
| <input type="checkbox"/> Municipal supply | <input type="checkbox"/> Commercially bottled | <input type="checkbox"/> Hauled municipal water (Name/phone number of water hauler: _____) |
|---|---|---|

WASTE WATER AND GARBAGE DISPOSAL

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|---|
| METHOD OF WASTE WATER/SEWAGE DISPOSAL: <input type="checkbox"/> Holding tank <input type="checkbox"/> Other (Please specify: _____) |
| NUMBER OF GARBAGE RECEPTACLES IN FOOD PREPARATION AREA: _____ |

I have reviewed the *Special Events Operating Guidelines*. I understand the requirements for food vendors at special events and have provided the information to all food handlers.

PRINT: _____ SIGN: _____ DATE: _____

THE FOLLOWING CONDITIONS/RECOMMENDATIONS ARE TO BE COMPLETED BEFORE THE EVENT IS ALLOWED TO COMMENCE:

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INSPECTOR: _____ DATE SIGNED: _____

FOR OFFICE USE ONLY

O. Reg 562
 Created/entered in Hedgehog as Special Event Vendor.
 If exempted, provided appropriate signage.
 Provided special event permit. This application is: APPROVED NOT APPROVED

- | | | | | |
|--|---|---|---|---|
| <p><u>Main Office</u></p> <p><input type="checkbox"/> Timmins 169 Pine St. South P.O. Bag 2012 P4N 8B7 (705)267-1181 or Fax. (705)264-3980</p> <p>1-800-461-1818 www.porcupinehu.on.ca</p> | <p><u>Branch Offices</u></p> <p><input type="checkbox"/> Cochrane Minto Centre P.O. Box 550 P0L 1C0 (705)272-3394 Fax. (705)272-4996</p> <p><input type="checkbox"/> Hearst Medical Centre P.O. Box 2470 P0L 1N0 (705)362-7808 Fax. (705)362-7462</p> | <p><input type="checkbox"/> Homepayne 247 Third Avenue P.O. Box 127 P0M 1Z0 (807)868-2091 Fax. (807)868-2225</p> <p><input type="checkbox"/> Iroquois Falls 58A Anson Drive P.O. Box 575 P0K 1G0 (705)258-2247 Fax. (705)258-2249</p> | <p><input type="checkbox"/> Kapuskasing 4 Ash St. P5N 2C8 (705)335-6101 Fax. (705)337-1895</p> <p><input type="checkbox"/> Matheson Bingham Memorial Hospital P.O. Box 490 P0K 1N0 (705)273-2954 Fax. (705)273-2522</p> | <p><input type="checkbox"/> Smooth Rock Falls 141 Fifth St. P.O. Box 388 P0L 2B0 (705)338-2654 Fax. (705)338-2250</p> <p><input type="checkbox"/> Moosonee 38 Revillon Rd P.O. Box 730 P0L 1Y0 (705)336-2294 Fax. (705)336-2919</p> |
|--|---|---|---|---|