

# Green Market Vender Form

Date Received: \_\_\_\_\_

Complete Application Package Rec'd: Y N

Designated location: Block \_\_\_\_\_  
Site \_\_\_\_\_



**Return Application Package to:**  
Stephen Avenue Walk Manager  
Calgary Downtown Association  
#720, 304 – 8 Avenue SW  
Calgary, AB T2P 1C2  
Or fax 403 265 1932

## APPLICANT INFORMATION:

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

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

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

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

## BUSINESS DESCRIPTION:

Describe the product or products or service(s) to be offered by your business.

---

---

---

---

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

**Acceptance of this application by Calgary Downtown Association  
does NOT constitute approval nor does it guarantee location.**