

PERSONAL INFORMATION

Business: _____ Name: _____

Physical Address: _____

Photo ID: License Number: _____ Or Passport Number: _____

Date of Birth: _____ Status: Bermudian Spouse of a Bermudian

Email: _____ Telephone: _____

I acknowledge that WEDCO will use this email address for all communications regarding this Vendor Application.

PRODUCT/SERVICE INFORMATION

Select the Appropriate Application Attachments: Product/Service Photographs Tent/Kiosk Visuals

Product/Service Category: Clothing/Accessories Health & Body Consumables
 Handmade, Artisan Non-Profit/Charity Other

Requested License Time: May, June & July August, September & October May to October 2 Years

Do you intend to pay the entire requested license time up-front in order to receive the corresponding discount? Yes No

Product/Service Description:

Product/Service Pricing Description:

Does your product/service reflect traditional Bermudian Heritage or educate consumers on Bermuda? Yes No

If Yes to the Above, Please Explain:

Do you have any previous Bermudian market experience with this product/service? Yes No

If Yes to the Above, Please Explain:

Have you been a vendor in Dockyard before? Yes No If so, when: _____

Is product/service produced or created entirely in Bermuda? Yes No

If No to the Above, Please Explain:

Is product/service appropriate for viewing/participation by all ages and demographics? Yes No

If No to the Above, Please Explain:

Is your product/service unique and able to positively contribute to the overall Dockyard experience? Yes No

If Yes to the Above, Please Explain:

Please provide a short description on how you plan to present/showcase your product/service:

Will your product/service and stall/presentation have any environmental impacts WEDCO should be aware of? Yes No

If Yes to the Above, Please Explain:

TERMS AND CONDITIONS

Please read and check each if understood. If a license is awarded, Terms of Vendor Participation are, but are not limited to:

- I understand the vendor fee is \$750.00 payable monthly in advance; in addition to an initial \$750.00 refundable deposit.
- I understand that non-negotiable core hours of operation are 10:00am to 4:00pm daily when cruise ships are in port and that it is the vendor's responsibility to monitor the cruise ship schedule changes.
- I understand that it is the vendor's responsibility to ensure all appropriate permits and permissions are acquired before the Dockyard vendor license commences.

Signature: _____ Date: _____