

# DOCKYARD VENDOR APPLICATION FORM



## 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.

## PRODUCT/SERVICE INFORMATION

**Application Attachments:**  Product/Service Photographs  Presentation/Stall Photographs/Illustrations

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

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: \_\_\_\_\_

## PRODUCT/SERVICE INFORMATION CONTINUED...

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: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## INFORMATION & TERMS

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 fee is \$500 payable monthly in advance.
- I understand an initial \$500 refundable deposit is required.
- I understand that non-negotiable core hours of operation are 10am to 4pm daily when cruise ships are in port.
- I understand 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 licenses are acquired before license commences.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_