Montréal 2019
STAND
C Corner, nb__ Métiers d'art Pavillon des saveurs

Surname and Name $\qquad$ Please indicate the size of the stand desired.

Studio Name $\qquad$

## Address

$\qquad$
City, Province $\qquad$
Postal code $\qquad$
Telephone $\qquad$
Cell $\qquad$
Email $\qquad$
website $\qquad$

Facebook, Twitter, Pinterest $\qquad$

I will share space with: $\qquad$
I will pay $\qquad$ \% of the cost of the stand I share.


I have read the Product Evaluation Guide and the Participation Guidee and I am committed to respecting all the rules contained in the documents. I also acknowledge that I must comply with the following conditions to qualify for the member rate: be a Professional Artisan, Workshop or Emeritus Artisan member of the Conseil des métiers d'art du Québec and must have paid the annual membership fee (which corresponds to the year of the event) when he/she signs this contract.
$\qquad$ Date

## PAYMENT TYPE



[^0]
[^0]:    If paying by check, please send it payable to «Le Salon des métiers d'art» for the deposit amount and a second check to CMAQ for the amount of the contribution. A fee of \$ $50.00+$ tax applies for declined transactions.

