



Nevis Culturama Committee

Culturama Secretariat, Phillip St. Jean Building, Ramsbury, Charlestown, Nevis.
Website: www.culturamanevis.com. Facebook: www.facebook.com/nevisculturamafestival
Tel: (869) 469 1992 or (869) 469 5521 Ext 6663. Email: thesecretariat@culturamanevis.com

NEVIS CULTURAMA FESTIVAL ART, CRAFT, AND FOOD FAIR REGISTRATION FORM

Name of Vendor:			
Address:			
Gender: Male <input type="checkbox"/>		Female <input type="checkbox"/>	Email address:
Telephone Contact: Home #:	Work #:	Cell #:	WhatsApp: <input type="checkbox"/> Yes <input type="checkbox"/> No
Type of Operation:			
<input type="checkbox"/> Drink Only	<input type="checkbox"/> Food Only	<input type="checkbox"/> Food and Drink	<input type="checkbox"/> Tray/Snacks <input type="checkbox"/> Barbecue Only
<input type="checkbox"/> Craft Only	<input type="checkbox"/> Clothing/Textile	<input type="checkbox"/> Information Only	<input type="checkbox"/> Art Only <input type="checkbox"/> Other
Please Specify Other here: _____			
<input type="checkbox"/> Please tick here if you will be operating a Barbecue Grill			
Do you have a valid Food Handlers Permit?			
<input type="checkbox"/> Yes <input type="checkbox"/> No			
If Yes indicate: (a) Permit # _____ (b) Expiration Date: (dd/mm/yy) ____/____/____			
<u>For Official Use Only</u>			
(a) Booth # Assigned # _____		(b) Liquor License # _____	
<u>Payment(s)</u>			
Deposit: (a) Amt. _____ <input type="checkbox"/> Cash <input type="checkbox"/> Cheque (b) Receipt # _____ Date: (dd/mm/yy) ____/____/____			
Deposit: (a) Amt. _____ <input type="checkbox"/> Cash <input type="checkbox"/> Cheque (b) Receipt # _____ Date: (dd/mm/yy) ____/____/____			
Final payment: Balance _____ Amt. Paid _____ Receipt # _____ Date: (dd/mm/yy) ____/____/____			
Signature: _____ Date (dd/mm/yy) ____/____/____			

**The deadline for registration is Monday, June 16, 2025, at 4:00 pm.
No registrations will be accepted after the above date.**