

Community Group Application Form

Dates requested: (A limit of 4 dates and 2 visits per year)	
Name of Organization:	
Contact Name:	
Phone Number:	
Fax Number:	
Email:	
Mailing Address:	
Charitable Registration #:	
Number of years in Business:	
What is the purpose of your organization?	
Types of products to be sold/promoted:	
# Tables and/or chairs required for your display:	

Insurance Requirements:

1. Please be advised that a \$5 million dollar liability insurance certificate is a pre-requisite.
2. Each organization must provide a copy of a Insurance Certificate with five million dollars (\$5,000,000) General Liability Coverage, and naming Redcliff Realty Management Inc., Redcliff Advisors and Woodside Square Holdings Inc. as the Additional Insured.

Please forward this completed application form and required information
by mail, fax or in person to:

Woodside Square Shopping Centre Administration Office
Attention: Lindsay Gill
1571 Sandhurst Circle, Suite 208
Scarborough, Ontario
M1V 1V2
Phone: 416-298-2331 ext 227
Fax: 416-298-4078

Once your application is approved, you will be notified and a formal contract will be sent to you. A copy of the insurance certificate with the above stated insurance requirements along with the signed contract, must be submitted to Woodside Square Shopping Centre no later than five (5) days prior to your commencement date. A confirmation, along with a Woodside Square floor plan indicating your location in the mall, will be sent to you after all required documents have been received.

Signature	
Date Signed	