



2024 Tony Cote Summer Games Vendor Application

Last Name	First Name	Business Name	Business Type
Mailing Address	City	Province	Postal Code
Email Address		Date of Birth	
Business License/Permit La Ronge _____ Air Ronge _____ Lac La Ronge Indian Band _____		Cellular Telephone	Home Telephone
S.I.N. Number	Treaty Number	<input type="checkbox"/> Male <input type="checkbox"/> Female	Criminal Record and Vulnerability Check provided? Yes / No
_____ Applicant Signature		_____ Date	

Approved by: _____

Location at Games: _____

Date: _____