

VENDOR INVITATION

Council will be hosting its annual **Wellness Day** on Thursday, **29 February 2024** at the **Saldanha Sport Stadium, Saldanha**. The purpose of the Wellness Day will be to promote emotional and physical wellness and once again engender a sense of hope and resilience amongst our employees.

We would like to avail a variety of products and services to employees and thus encourage vendors from all industries to participate in the event. Vendor space on the sports field is free of charge.

Vendors should take note of the following:

- All material, tools, equipment, tables, chairs, gazebo, promotional material should be provided by organization/company.
- The cleaning of the allocated area during and after the event would be the responsibility of the organization/company.
- If food will be sold, the valid food trade certificate should be provided.
- Setting up will be allowed from 08:00 and all vendors should be ready for delivering/promotion of their products/service at 10:00.
- Council will provide one electrical point and a refuse bin per vendor.
- Council will be indemnified from any harm/ or loss experienced during the event.
- A vendor selection process will take place following the closing date and successful vendors will be informed.

Complete and submit this application form no later than Thursday, **30 November 2023** at **12:00**. Submissions can be made via email to: Aneke.Delport@sbm.gov.za OR hand delivered to the Human Resources Office, 21C Main Road, Vredenburg. Confirmation of receipt will be made after receipt of the application.

For any vendor related enquiries contact Aneke Delport via the email mentioned above or telephonically at (022) 7017064.

VENDOR APPLICATION FORM

BUSINESS INFORMATION

Company/Organization Name	
Applicant: Name & Surname	
Contact Number	
Email Address	
Address/Location of business	

PRODUCT/SERVICE CATEGORY

(Please elect a category best describing your product/service)

Physical Wellness	<input type="checkbox"/>	Accessories/Jewellery	<input type="checkbox"/>
Emotional Wellness	<input type="checkbox"/>	Clothing	<input type="checkbox"/>
Beauty Products/Services	<input type="checkbox"/>	Food	<input type="checkbox"/>
Financial Services	<input type="checkbox"/>	Refreshments	<input type="checkbox"/>
Palliative care (care for elderly/disabled persons)	<input type="checkbox"/>	Other (Please describe below)	
Entrepreneurship Advice	<input type="checkbox"/>		

DESCRIPTION OF SERVICE/PRODUCT

(Provide a short description of your product/service)

PRICE RANGE PER

ITEM

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SIGNATURE: APPLICANT

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DATE

