



## IODE Ontario

106<sup>th</sup> Provincial Annual Meeting

Saturday April 18, 2026 (Hybrid Meeting)

Holiday Inn Peterborough-Waterfront, 150 George St. N., Peterborough, K9J 3G5

### Shopping with Chapters Rules & Regulations

1. **Tables** – IODE Ontario will provide a six-foot table space. Cost of \$20 per table. Cheques made payable to “**Provincial Chapter of Ontario IODE**”, to be received by **27 March 2026**.
2. **Location** – “**Shopping with Chapters**” will be located in the Meeting Room where all sessions are held. You must ensure the security of your goods and monies. Please note the required staffing hours below. Set-up times Friday confirmed upon receipt of application. Saturday April 18<sup>th</sup> 7:30 a.m. – 9:30 a.m. (early shopping); 12:00 p.m. – 1:00 p.m. and after the Provincial Annual Meeting.
3. **Signs** – Chapters must have signage with the chapter name, article(s) for sale and prices.
4. **Submissions** – Provide a brief written description of items for sale on the form with the \$20 fee.
5. The Provincial Annual Meeting Convenors must approve all articles for sale and reserve the right to limit items to avoid duplications.
6. No home baked goods or raffle tickets will be approved.
7. The attached form and fee payment are required by **March 27<sup>th</sup>** for a table.

**Thank you for adding to the Success of our Provincial Annual Meeting.**

### Shopping with Chapters Application Form

IODE \_\_\_\_\_ **Chapter** wishes to reserve space in the **Shopping with Chapters** area at the Provincial Annual Meeting to sell the following items.

Describe items: \_\_\_\_\_

\_\_\_\_\_

Return this Application Form and Cheque payable to “**Provincial Chapter of Ontario IODE**” or **e-Transfer to [treasureriodeontario@gmail.com](mailto:treasureriodeontario@gmail.com)** to be received by **27 March 2026**.

**Mail to:** IODE Ontario, PO Box 80085, Burlington RPO Appleby, ON, L7L 6B1

Chapter President \_\_\_\_\_

Chapter Member \_\_\_\_\_

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Telephone Number \_\_\_\_\_

Telephone Number \_\_\_\_\_

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Email Address \_\_\_\_\_

Email Address \_\_\_\_\_

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**Date of Submission** \_\_\_\_\_ **Method of Payment (circle one) Cheque / e-Transfer**