

Lemonade Day!®



BUSINESS LICENSE APPLICATION

NORTHERN ALBERTA

APPLICANT: _____

TELEPHONE: _____

ADDRESS: _____

CITY: _____ PROV: _____ PC: _____

EMAIL: _____

OWNER OF LAND OR STAND LOCATION: _____

STREET ADDRESS OF LEMONADE STAND: _____

DATE OF LICENSE: Commencement _____ Completion _____

Signed:

X _____
Entrepreneur

X _____
License Officer

X _____
Date



Community Futures Northern Alberta