

Innisfail Chamber of Commerce Market Day Extravaganza - Sunday 28 March 2010

EXPRESSIONS OF INTEREST : STALLHOLDERS

Thank you for your interest in participating in the Feast of the Senses Market Day Extravaganza. Please follow instructions to assist us in correctly allocating sites. Incomplete Application forms may result in an unsuccessful application.

**APPLICATION FORM MUST BE
RETURNED BY
Friday 19 February 2010**

1. Please print answers to all questions clearly.
2. Please be specific in produce descriptions.
3. Public and Product Liability Insurance must be held and proof provided by each stallholder.
4. Do not send payment with this application. Successful applicants will be invoiced. Payment of which must be received before 12 March 2010 together with copy of insurance cover.

SEND APPLICATION FORM & INSURANCE TO:

MAIL: Kirsty Densmore, Feast of the Senses, PO Box 1678, INNISFAIL QLD 4860

FAX: 07 4061 9938

EMAIL: martinandkirsty1@bigpond.com.au

LIMITED STALL SITES AVAILABLE

SCHEDULE OF FEES (GST Inclusive)

Per Stall Site 3m x 2m

Community Group/Not for Profit	\$ 55.00
General Stall - Unpowered	\$ 60.00
General Stall - Power	\$ 75.00
Food Vendor - Unpowered	\$100.00
Food Vendor - Powered	\$160.00

Successful Applicants will be advised by Wednesday 3 March 2010

Successful Applicants will be invoiced and payment will be due on receipt of invoice. All amounts owing must be received by 12th March 2010.

Should you require any further information please contact Kirsty Densmore, Festival Manager on 4061 6881, mob 0413 010 625 or email martinandkirsty1@bigpond.com.au

Please retain this page for your information.....



EXPRESSIONS OF INTEREST FORM

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PLEASE RETURN THIS FORM ONLY with your "Certificate of Currency" of Public and Products Liability to Feast of the Senses, PO Box 1678, Innisfail Qld 4860, email to martinandkirsty1@bigpond.com.au or fax to 4061 9938

CONTACT DETAILS (please print clearly)

Company (if applicable): _____

Contact name: _____ Mob: _____

Postal Address: _____

Telephone: _____ Fax: _____

Email Address: _____

SITE DETAILS (please print clearly)

You will be allocated a stall site of 3m x 2m

Sampling food products? Yes / No Sampling liquor? Yes / No

(Priority placement will be given to food / liquor vendors who provide free sampling)

Please contact the Cassowary Coast Regional Council Environmental Health Officer on 4030 2222 to determine your food compliance requirements. A "Temporary Food Licence" will be required if selling/sampling food.

LIST OF PRODUCTS AND/OR SERVICES (please clearly print and outline of your products / services)

	Please indicate category of your stall
	<input type="checkbox"/> Community Group / Not for Profit
	<input type="checkbox"/> General Stall – unpowered
	<input type="checkbox"/> General Stall – powered
	<input type="checkbox"/> Food Vendor – unpowered
	<input type="checkbox"/> Food Vendor – powered

Will you require Electricity? Yes / No Do you intend to use gas? Yes / No

Permission to use 'element' powered appliances will be very limited.

List of Appliances and Amps or Watts required :

SIGNATURE OF APPLICANT (please print clearly) I have read and accepted all the terms and conditions. I understand that it is my responsibility to inform the organisers in writing of any changes to the above details. I also understand that returning this application does not guarantee selection as a stall holder at the Feast of the Senses Innisfail Chamber of Commerce Market Day Extravaganza 2010

Signature or contact person Date: ____/____/2010

Received:
Public Liability: Yes/No
Product Liability: Yes/No
Tax Invoice No.:
Paid: