



Stallholder Application Form

Business Name:		ABN/ACN:
Contact Person's Name:		
Address:		
		Postcode:
Phone:	Mobile:	Fax:
Email:		
Event Name:		
Please provide a brief product and/or service description:		
The Bingara Special Events & Projects Committee & Gwydir Shire Council will endeavour to but cannot guarantee product/service exclusivity on the day. No refunds will be given due to cancellation of event caused by circumstances beyond the control of the organising committee e.g. wet weather. It is a requirement that all stallholders meet current OH&S standards and all food service operators are to comply with the current Health and Safety Regulations.		

Stall Site Fee	Cost Per Site	QTY Required	Total
Stall Site (3m x 3m)	\$20.00	_____	\$___N/A___
Powered Stall Site (3m x 3m)	\$50.00	_____	\$___N/A___
Public Liability Insurance♦	\$12.00	_____	\$_____

♦Only payable if current public liability insurance is not held.

***Powered sites are limited. First booked, first served**

Please send in a copy of your insurance and payment with this application form

Gwydir Shire Council, Locked Bag 5, BINGARA NSW 2404

Terms & Conditions

GOODS: the stallholder is not permitted to sell any second hand goods
 ALLOCATED AREA: the stallholder must only trade within the site allocated, and site locations will not be amended on the day. The stallholder agrees that all persons who are working at the stall site are suitable to work with children.
 SITE SET UP: Stallholders must set up their display/stall in a safe work manner.
 INSURANCE: Stallholders must provide Council with a copy of their current public liability insurance policy at time of application. Stallholders must possess and carry with them a current public and product liability insurance and show proof when requested.
 OH & S: All stallholders are to implement and abide by best practice principles in Occupational Health and Safety and Local and State Government Health and Statutory Regulations. Stall holders must abide by any direction given to them by the Committee in relation to risk management.

I have read and I agree to the above Terms and Conditions of this Application.

NAME (Please Print)

SIGNATURE

DATE