



GILLINGHAM & SHAFTESBURY AGRICULTURAL SOCIETY

Annual Show – Wednesday 14th. August 2019

Closing date for applications MAY 1st.

APPLICATION FOR OPEN TRADE STAND

PLEASE ENSURE THAT YOU BOOK SUFFICIENT SPACE to include guy ropes, tow bars, awnings etc.
Any exhibitor who encroaches on to a neighbouring stand will be relocated possibly to a less salubrious location

CONTACT DETAILS (please print in block capitals)

Name of company or individual:

Contact name:

Address:

Post Code:

Telephone:

Mobile phone:

Email:

Website:

Type of stand	Price per 3metre unit	Price per unit 3 unit, if 3 or more units make up the stand	Size of stand	Total cost
OPEN SPACE 7.5m depth	Standard rate £128.00	Standard rate £116:00m. frontage X 7.5m depth	
OPEN SPACE 15m. depth	Standard rate £240:00	Standard rate £220:00m. frontage X 15m depth	
Extra passes (2 passes included for the 1 st . unit and 1 pass for each subsequent unit) @ £10.00 each				
Sponsorship prize money for classes				
LATE BOOKING SURCHARGE – AFTER MAY 1st. add 15%				
Payment – Cheque payable to:- G & S Show			Please	Total Cost
BACS – G & S Show Sort code 30-93-45 A/c No 02337135			Tick	VAT @ 20%
Credit/debit card phone office 01747 823955			Box	Total payable

A VAT receipt & acknowledgement of your booking will be sent to you within 14 days of receipt of your application

We would prefer our usual site/We would like to relocate/We are a new exhibitor *Please circle*

We intend to include live music/entertainment on our stand which might attract a crowd YES/NO

We wish to sponsor prize money for classes:-

We will require an electrical supply? **If YES please book your supply direct with our contractor:-** YES / NO

LX Trix Ltd, 12 Lockey Road, Shepton Mallet BA4 5RQ Tel: 01749 823162 E-mail: info@lxtrix.co.uk

GDPR - DATA PROTECTION - CATALOGUE DETAILS (the details shown below will be published in the Show Programme, Catalogue & displayed on the Show Website. By completing this section you agree to the publication. IF you DO NOT want your details published please cross through the box below

Company name

Website OR Email address

Phone Number

Description of goods or services **(max 15 words)**

PLEASE CONTINUE TO NEXT SHEET

GILLINGHAM & SHAFTESBURY AGRICULTURAL SOCIETY LIMITED, Show Office, Station Road, Gillingham SP8 4PY

Phone – 01747 823955 Email – enquiries@gillshaftshow.co.uk www.gillshaftshow.co.uk

A Company Limited by Guarantee. Registered in England & Wales No. 4971254 Charity Registration No. 1115942

COMPULSORY RISK ASSESSMENT FORM

THIS FORM MUST BE COMPLETED AND RETURNED WITH YOUR APPLICATION Please consider what risks there are to those building the stand and to your staff and members of the public on Showday. Outline the steps that you propose to take to minimise these risks. Copy this page if more space is required. Alternatively you can send details of your existing Health & Safety arrangements relevant to exhibiting at Shows

Hazard	Persons at Risk	Controls to minimise risk
FIRE ASSESSMENT		
A FIRE EXTINGUISHER MUST BE PROVIDED AND A FIRE ASSESSMENT UNDERTAKEN BY ALL EXHIBITORS		
Liquefied Petroleum Gas (LPG) on site YES/NO		
Are you service hot food or drinks either for sale or hospitality? YES/NO		
Will you be using a generator YES/NO		
CONTACT DETAILS of person completing this assessment		
Name of Company or responsible individual		
Address		
Signed	Print name	Date
PUBLIC LIABILITY INSURANCE all exhibitors must provide a copy of their certificate with this application, if the policy is due for renewal before the Showday, please also forward copy of new document as soon as available		
Insurer	Expiry date	
Policy No:	Show Office use - Copy received	
Other Information		
There will be ____ persons on site staying on the stand/in the camping area on Sun / Mon / Tues / Wed		
Requests/requirements		

I have read and understood the rules & conditions and hereby undertake on behalf of myself/ourselves and on behalf of all persons in my/our employ to abide by the rules and conditions. I confirm that I/we require an outside stand.....metres frontage xmetres depth

Signed..... Print name.....Date...../...../.....

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