

40th Annual Tocal Beekeepers' Field Day

12th October 2019

1. Exhibitor Details

Business name ABN

Postal Address Suburb Postcode

Contact Person Email – please double check this and make sure it is both legible and correct

Phone Mobile

What do you sell or promote?

How would you like to receive event updates, confirmations etc? POST EMAIL

2. Site Selection

Please select from the following;	Size Site Required	Cost	Amount Due
<input type="checkbox"/> I am a returning exhibitor and would like the same site as last year			\$
<input type="checkbox"/> I am a returning exhibitor but would like a different site			\$
<input type="checkbox"/> I am a new exhibitor			\$
<input type="checkbox"/> I am an association or club and <u>not selling anything</u>		\$50	\$
			\$

3. Fees

Site fees are as follows;

- Up to 5m x 5m (so 25 m2) \$150 (**Sites: B1 - B2, B5, B7- B11, B16 - B19**)
- Up to 10 x 10 m (so 100 m2) \$300 (**Sites: B3 - B4, B6, B12 - B14**)
- If your site is larger than 10 x 10 please contact us so we can confirm a space and cost

4. Payment

- Sites are not confirmed without payment

<input type="checkbox"/> DIRECT DEPOSIT – BANK: Westpac ACCOUNT NAME: Tocal Field Days Assoc Inc. BSB: 032-529 / Account No. 90-1593 Date of transaction: __ / __ / __ Amt: \$ _____ <i>IMPORTANT!!!!</i> Please quote <u>THE NAME YOUR APPLICATION IS IN</u> as a reference on your payment.	<input type="checkbox"/> CREDIT CARD <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard Name on Card Card No: ____ / ____ / ____ / ____ Expiry Date / Amt: \$..... Signature:
<input type="checkbox"/> CHEQUE mailed to Tocal Field Days, Tocal Agricultural Centre, 815 Tocal Rd, Paterson 2421	

4. Public Liability Insurance

I have supplied a copy with this application My insurance will expire prior to the event - I forward the new one when it is renewed.