



STALL APPLICATION FORM

Worcester BANK HOLIDAY MONDAY Market

Every Bank Holiday Monday 10am to 4pm down by the river.

The Quay, Worcester, WR1 2JJ

All trades welcome, stalls provided!

*DATE OF MARKET REQUIRED.....2017

Bank Holiday Monday dates are: Mon17th April, 1st May, 29th May, 28th August

*N.B. Please use one form per market, multiple bank holiday markets cannot be booked on one booking form

Name.....

Address.....

.....Post Code.....

Telephone.....mobile.....

email.....

Goods sold (please give detail).....

I require (no of stalls).....stall/s (3m Pop-up canopy, with counter).

Please indicate the number of stalls you require, N.B. Rent is £35 per stall, per day.

*N.B. Caterers MAY NOT APPLY FOR A POSITION using this booking form, caterers MUST only apply by email to linda@lsdpromotions.com with full menu of food/drink, and 2 or 3 clear images of the catering unit.

PAYMENT: N.B. Pre-paid stall rents are NON-REFUNDABLE, including traders cancelling themselves, or the market being cancelled by the Operator for reasons of adverse weather conditions or otherwise.

I enclose my payment of rent for the day by CASH/CHEQUE (To: LSD Promotions)

TOTAL VALUE £.....

I DO / DO NOT require temporary insurance. N.B. ALL traders must have public liability insurance cover. Temporary cover can be arranged for non-regular market traders (for an extra charge of £5.00 per day). **All traders using their own insurance must provide a photocopy and attach it to this booking form. **N.B. LSD Promotions do not accept any responsibility for injury, damage or loss to any person, stock, or property whilst on site. By applying for a pitch and attending the event you indemnify LSD Promotions against any claims or damage which may arise as a result of your visit.

CARD PAYMENT: I enclose my payment of rent for the day by CREDIT/DEBIT CARD below:
Please return this form to LSD Promotions, Ground Floor Offices, Stamford Mews, Enville

NAME OF CARDHOLDER:.....	CARD TYPE
CARD NUMBER.....	
EXPIRY DATE.....	START DATE.....
CCV: (3 digits on back of card).....	ISSUE NUMBER: (if applicable).....
TOTAL AMOUNT TO BE DEDUCTED FROM CARD £..... Signature.....	

FOR OFFICE USE ONLY.

Receipt No:

Date of payment:

Payment Location:

Cash / Cheque / Card

Payment taken by:

Traders own insurance Policy No:

Expiry Date: