SIOE LLANDYSUL A'R CYLCH LLANDYSUL & DISTRICT SHOW

APPLICATION FOR TRADE SPACE AT 2018 ANNUAL SHOW

Hengae Fields, Saron, Llandysul, SA44 4AU

Saturday 1st September, 2018

Name of Company:

| Telephone No: | | | |
|---|--|--|--|
| Nature of Business: | | | |
| Frontage Required: | | | |
| (Cost £1.00 per | foot, min £25.00, maximun depth 40 foot) | | |
| Number of representatives on o | duty (Max 2 free passes) | | |
| Number of trade stand vehicles entering the show field (Max 2 vehicle passes) | | | |
| PLEASE NOTE : NO T | RADE STAND TO DISMANTLE BEFORE 4.30PM | | |
| I enclose a remittance of £ for feet frontage (min £25.00) on the understanding that if the Show is cancelled this sum willbe refunded. | | | |
| Cheques | s payable to 'Sioe Llandysul Show'. | | |
| abide by the rules, regulations and sar Third Party Risk Insurance to cover | re <u>completed the Risk Assessment from overleaf</u> , and agree to ftey policies as set out by the Show Society <u>and have appropriate</u> the <u>Stand</u> . The Show Society has the right to refuse any ction on this form has not yet been completed fully an signed. | | |
| • | n this application to Mrs Delyth Evans | | |
| · | n,Saron,Llandysul. Tel: 01559 371387; | | |
| Emaii: dely | th175@gmail.com As soon as possible. | | |
| | PLEASE TURN OVER | | |

THIS SECTION MUST BE COMPLETED FULLY FOR ALL TRADE STANDS RISK ASSESSMENT FORM

(Please complete using BLOCK CAPITALS)

| Company Name: | | | |
|--|---------------------|------------------------------------|--|
| Address: | | | |
| Telephone: Responsible Person: | | | |
| Date Assessment Undertaken: Signature of Assessor: | | | |
| | | | |
| Hazard | Who might be harmed | Is more needed to control the risk | |
| | | | |
| | | | |
| | | | |
| | | | |
| FIRE ASSESSMENT | | | |
| | | | |
| | | | |
| Liquefied Petroleum Gas (LPG) on site Yes/No (please circle) | Cylinder Size. | | |