

DENILIQVIN TRUCK SHOW & INDUSTRY EXPO

Proudly supported by the **Rotary** Club of Deniliquin



**TRADE & CATERING SITE
APPLICATION – Not-for-Profit
Applications Close 5pm, August 31, 2024**

Deniliquin Truck Show & Industry Expo inc.

PO Box 911, Deniliquin NSW 2710.

Email: hello@denitruckshow.com.au

Website: www.denitruckshow.com.au

ABN: 31 922 145 442

PLEASE READ AND FILL OUT EVERY SECTION OF THE APPLICATION FORM

INCOMPLETE FORMS WILL NOT BE ACCEPTED

**TRADE SITES WITHOUT COMPLETED PAPERWORK WILL BE REFUSED ENTRY AND
ARE INELIGIBLE FOR A REFUND.**

COMPANY/BUSINESS NAME _____

SITE NAME _____

OWNER/MANAGER _____

ABN/ACN _____

ONSITE CONTACT _____

POSTAL ADDRESS _____

SUBURB/TOWN _____ STATE _____ P/CODE _____

PHONE _____ FAX _____

MOBILE _____ EMAIL _____

WEBSITE _____

SITE TYPE:

- Mobile Vehicle/Trailer/Van Registration: _____ Temporary Marquee /Vending
- Car/vehicle display

EXACT SITE SIZE (including towbar):

Total Frontage: _____ m Depth: _____ m Height: _____ m

STRUCTURE REQUIRED: YOU MUST ORGANISE YOUR OWN MARQUEE IF REQUIRED. DETAILS ARE IN THE APPLICATION PACK.

FIRE SAFETY: Does the Site have a current Fire Extinguisher? **YES / NO**

Does the Site have a Fire Blanket? **YES / NO**

TRADING TIMES & VENDOR PARKING

All sites are required to trade from 10am to 5pm, Saturday, October 26,2024.

Note: Please Refer to the Terms and Conditions Regarding Parking within the Event Site

HAVE YOU TRADED AT A FESTIVAL or AN EVENT BEFORE?

PLEASE LIST THREE (3) EVENTS THE SITE HAS TRADED AT IN THE LAST 12 MONTHS:

FESTIVAL: _____ Contact name: _____
Phone: _____

FESTIVAL: _____ Contact name: _____
Phone: _____

FESTIVAL: _____ Contact name: _____
Phone: _____

PUBLIC LIABILITY INSURANCE - Insurer: _____

Date Paid To: ____/____/____

COPY ATTACHED (Please Tick):

A CERTIFICATE OF CURRENCY FOR \$20 MILLION: Policy Number:

Interested Party: Deniliquin Truck Show and Industry Expo

COPY ATTACHED (Please Tick):

WORKERS COMPENSATION CERTIFICATE OF CURRENCY:

COPY ATTACHED (Please Tick):

NSW FOOD SAFETY SUPERVISOR CERTIFICATE:

COPY ATTACHED (Please Tick):

Trade Site Packages:

If you wish to purchase additional Entry Tickets, please indicate below:

Adult Entry Ticket - \$15.00 No of Passes: _____ Cost: \$ _____

TOTAL COST: \$ _____

Trade Site..... \$ _____

Power outlets..... \$ _____

Total Extras \$ _____

GRAND TOTAL \$ _____