

If you wish to be a stall holder, please see application below and return to: Latoya\_Harbin@health.qld.gov.au

## Summer Markets - Stall Application Form

Personal details:			
Name			
Address			
Phone			
Email			
Size of stall			
Stall name			
ABN: (if applicable	e)		
Brief description	ı of goods you w	ill be displaying or s	elling:
Arts & Crafts		^ · · · ·	
Clothes			
Ciotics			
	☐ Hot food		vou roquiro pouver?
			ou require power?
Food	□ Sweets		es
1000			9
	□ Snack Food		0
Information			
mormation			
Knick Knacks			
Plants			
Other			
(Eg raffle tickets)			
		n <b>6:00 am – 9:30 am</b>	
23 <sup>rd</sup> February 2	2013. Rockhampt	ton Australian South	Sea Islander Community Inc.
take no responsi	bility of your equ	ipment while on the	ir grounds.
		hold your stall, which	ch is to be paid on or before
16 <sup>th</sup> February 2			
*Stall site holders are	e required to take their	r rubbish with them.	
×	<u></u>		
Name			
Stall name			Site #
Phone		Email	Dessint #
Paid		$\Box$ Yes	Receipt #
Stall holder signat	ture		Date: