

For Office Use Only

2017 Block/Stand No

Date Received

Payment Received

Stand Plotted

Risk Assessment Received

2017 Stand Size

LOCAL PRODUCE MARKET

24th, 25th & 26th July 2018 The Showground, New Park, Brockenhurst, Hampshire SO42 7QH

Closing Date: 15th April 2018

gordon@newforestshow.co.uk

COMPANY/TRADING NAME:	
CONTACT NAME:	
(Title, First Name, Last Name)	
ADDRESS:	
COUNTY:	POSTCODE:
TEL NUMBER:	MOBILE NUMBER:
E-MAIL:	WEBSITE:
To apply for a stand within this area you must be a current memb Farmers Markets.	
I confirm I am a member of:	Click to tick box
Hampshire Fatt	rmers Markets
Please note that we give priority to our existing e	HIBITORS xhibitors who apply before the 15th April 2018. u have attended in the last three years:
If possible please include photos of your stand se	et up and/or products you intend to sell/promote.
DESCRIPTION OF PRODUCTS AN	

Date Payment Banked

2018 Stand Size

2018 Block/Stand No

NEW FOREST A	ND HAMP	SHIRE COL	YTNU	SHOW	
	2018 Stand Red	quirements			
Company/Trading Name:	Size			Price (£)	
	Frontage (m)	Depth (m)	(The S	Society is exempt f	rom VAT)
Shedded Stand £250	3m	3m			
Shedded Stand (including on-site consumption surcharge) £350	3m	3m			
Non-Shedded Stand (including on-site consumption surcharge) £350	3m	3m			
Double Shedded Stand £490	6m	3m			
Double Shedded Stand (including on-site consumption surcharge) £685	6m	3m			
Double Non-Shedded Stand (including on-site consumption surcharge) £685	6m	3m			
Corner Shedded Stand £340	3m	3m			
Corner Shedded Stand (including on-site consumption surcharge) £475	3m	3m			
One Day Shedded Stand £85 (Please indicate preferred day. Subject to Availability, limited number available)	3m	3m	TUES	WEDS	THURS
	ADDITIONAL RE	QUIREMENTS			
Electricity	Refer To Service	es Booking Form			
One Table and Two Chairs - £15		_			
Additional Table - £10		-			
One Day Admission Tickets - (£14.50 Each)		ocated six free tickets per three by (2 per day)			
Official Caravan Pass - (£40 Each)	+	20th - 27th July			
Show Guide Advert (See Tradestand Information Booklet for details)	Full Page - £340 Half Page - £180 Quarter Page £140 Inside Front/Back Cov				
Sponsorship	Bronze - £175 Silver - £800 Bespoke				
Please contact Amanda our Sponsorship Secretary to discuamanda@newforestshow.co.uk or 01590 622400	ss bespoke sponsorship p	ackages tailored to your re	equirements;		
Number of persons sleeping wit Please supply this information for fire,					
	TOTA	L AMOUNT DUE			
I hereby apply to exhibit the items detailed in this application I agree to abide by the rules and regulations issued by The Nagreed days of the 2018 New Forest & Hampshire County S	New Forest Agricultural Sh			otal amount payable	e and exhibit on a
Signed or typed name:					
Print Name:					
Company Name:					
Date:					
All applications must include the following: Completed Application Form Services Booking Form (if applicable) Payment Form Show Guide Listing Completed Health and Safety Questionnaire	G T T N B H S	lease return completed applica fordon Romley The New Forest & Hampshire C The Showground Iew Park rockenhurst Idampshire O42 7QH el: 01590 622400 E-mail: gordo	County Show	w co uk	

SERVICES BOOKING FORM

Company/Trading Name:		
On-Site Contact Name:	Mobile Telephone	No:
	PORTANT INFORMATION	
If you wish to specify the location of electricity po	nts please supply a diagram with t	his Booking Form.
All electrical equipment used must be PAT tested (evidence to be available on request).		
All power is supplied from generators and will be a lf you require power for a longer period of time pl		v 23rd July through 7pm on Thursday 26th July
Please refer to page 10 of the tradestand informati	on booklet for photographs of 16	amp and 32amp connections.
	icity made after the 1st June 2018 f the Society and liable to a 25% su	
SUPPLY	PRICE	NUMBER REQUIRED
16amp (3kw) Single Phase	£116	
32amp (7.2kw) Single Phase	£200	
ELECTRICITY ADAPTO	OR (OPEN SPACE AND SHEDDE	D STANDS ONLY)
Adaptor for domestic plug (16amp Single Phase only)	£30	
TOTAL COST (OF ELECTRICITY REQUIREMENT	TS £

SHOW GUIDE

ple	•	to p	within the tradestand section of our Show Guide, burchase advertising space within the publication please refer to 1590 622400.		
Fo	For your free listing please complete the following section:				
Tic	ck if you would like us to use the same contact information as	s pr	ovided on the front page of this application form		
Alt	ernatively please complete the following:				
Сс	ompany/Trading Name:				
<u></u>	ontact Name:				
100	ontact Name:				
Tel	ephone Number:	E-	-mail:		
W	ebsite:	_			
De	escription (Max 25 words)				
P	LEASE TICK ONE OF THE BELOW CATEGORIES T	TH/	AT BEST SUITS YOUR COMPANY CLASSIFICATION		
	Agricultural Machinery		Forestry and Related Industries		
	Animal Feeds, Health, Equipment and Services		Fuel and Energy (non renewable)		
	Art and Culture		Gardening, Garden Furniture and Equipment		
	Auctioneers and Estate Agents		Gifts, Toys, Games and Novelties		
	Bags, Hats and Accessories		Health and Beauty		
	Banking and Financial Services		Holidays, Leisure, Hobbies and Tourism		
	Charity		Home Improvements and DIY		
	Clothing and Knitwear		Household Goods, Services and Furnishings		
<u> </u>	Conservation and the Environment		Jewellery, Clocks and Watches		
<u> </u>	Craft		Livestock Breeding and Breed Societies		
	Education and Training		Motor Vehicles and accessories		
	Equestrian Clothing, Equipment and Services		Outdoor Clothing		
	Fencing and Gates		Publications, books and print		
<u> </u>	Food and Drink		Renewable Energy		
	Footwear				

TRADE EXHIBITOR PAYMENT FORM

Company/Trading Name:	
Total Payment Due: £	
(Please include additional services and tickets etc)	

Please note that your application will not be confirmed until full payment has been received.

I WISH TO PAY BY CHEQUE

Please make cheques payable to "NFASS" and send with your completed Application Forms. Please note that a charge of ± 15 will apply for any declined cheques

I WISH TO PAY BY BACS

Account Name: New Forest Agricultural Show Society

Account Number: 00670054

Sort Code: 30-95-32

I will use the following payment reference:

Payment has been/will be made on:

		PAYMENT BY DEBI	T/CREDIT CARD		
Card Type:					
	MasterCard	Visa Credit	Switch/ Maestro	Visa Debit	
Card Number:					
Expiry Date:		Seco	urity Code (3 digits):		
Name on Card:					
Postcode: (where card is registere	ed)				
House Number:					

All applications must include the following:

Completed Application Form

Services Booking Form (if applicable)

Payment Form

Show Guide Listing

Completed Health and Safety Questionnaire

Please return completed applications to:

Gordon Romley

The New Forest & Hampshire County Show

The Showground

New Park

Brockenhurst

Hampshire

SO42 7QH

Tel: 01590 622400 E-mail: gordon@newforestshow.co.uk

HEALTH AND SAFETY QUESTIONNAIRE

This form is part of your application and therefore must be fully completed by all exhibitors / traders and must be returned with the rest of your application to the Show Office. Where evidence is requested (i.e. Public Liability Insurance), this must be available for inspection at all times whilst on site. It is your responsibility to ensure that suitable and sufficient risk assessments are carried out to cover your operations and activities at our Show. You are also required to consider the risk of fire within your stand / structure. Failure to comply with reasonable health and safety precautions, may result in you being removed from the site. All staff on site during the Show should be fully briefed on all Health and Safety matters.

Company Name:		
Name of On-Site Contact:		
Emergency On-site Telephone Number:		
Name of Night Emergency Contact:		
Emergency Over Night Contact Number:		
Please provide a description of the product(s) on display and / or activities taking place. Please include the intende your stand / unit:	ed size and st	ructure of
INSURANCE		
It is mandatory to have Public Liability Insurance to attend the Show.		
Do you or will you have Public Liability Insurance to cover the period of the Show? (Evidence of this insurance must be available during the Show)	YES	NO
Name of Insurer:		
Amount of Cover:		
The Policy Term: (Date from - Expiry Date)		
RISK ASSESSMENT		
It is mandatory to have completed a Risk Assessment prior to attending the Show. Will you have completed a full and thorough risk assessment covering your stand / structure set up, break down and the operations you intend to undertake prior to attending the Show?	YES	NO
This must include (but not limited to): Vehicle movements, erection of marquee / stand, work at height (including the use of ladders), use of machinery, manual handling, slips, trips and falls, hazardous substances, adverse weather conditions, risk of fire etc. (Evidence of this assessment must be available during the Show)		
GENERAL		
Do you intend to dig, excavate or pin into the ground to such a depth that you may come into contact with underground services such as cables or pipework? If yes, please contact the Show Office for advice on procedures.	YES	NO
CATERING / FOOD AND DRINK		
If you are providing catering (food/drink) are you registered with your local authority?	YES	NO
Name of authority registered with?		
Please state the food hygiene rating you have been awarded and the trading name under which the hygiene rating Food Standards Agency website:	is published	on the
Will you be selling or sampling alcohol? (If so, have you obtained a tens licence from the New Forest District Council)	YES	NO

If you intend to sook food on	-site, what method of cooking will you use?			
III you intend to cook lood on	-site, what method of cooking will you use:			
	FIRE ASSESSMEN	IT		
Exhibitors must ensure that a	Il upholstered furniture, curtains, drapes, tents		ave been tre	ated to give
	ic must meet an appropriate fire performance.			
	this rule will lead to closure of the stand until			
Are the structures, roofing, w	alls and fittings of your stand / unit flame retard	lant?	YES	NO
Where necessary, are sufficient Do they comply with current	nt directional signs displayed indicating escape r regulations?	outes?	YES	NO
	kept unobstructed at all times?		YES	NO
			1 53	NO
Do you have an adequate nun	nber of fire extinguishers / fire blankets available	e for easy use?	YES	NO
Has your firefighting equipme	nt been tested in the last 12 months?		YES	NO
,	vare of what to do should an incident occur? Do it and operate the firefighting equipment suppli	,	YES	NO
Have you identified all ignition	n sources and ensured they are kept away from	combustible / flammable materials?	YES	NO
Do you have sufficient refuse	bins and ensure all refuse is kept away from you	ur stand/ unit?	YES	NO
Will you or any staff member	s be sleeping on your stand/unit?		YES	NO
	stand / unit is a working smoke detector fitted	and, are exit routes maintained	YES	NO
All portable electrical applian	ces (over a year old) must have been PAT tester r electrical appliances comply with this regulation		YES	NO
Are you aware that generator			YES	NO
Are you aware that you must	not stock certain items such as: fireworks, gard	en flares candles tea lights etc?	YES	NO
	stand. Please confirm you will not use LPG at t		YES	NO
	any of the above questions, please provide deta			
arising.	any or the above questions, prease provide dea	and or the actions taken to avoic any		caacions
DECLARATION: I/we hereby	confirm that we will take all due care and dilige	ence with regards to the health, safety	y and fire ris	ks on our
stand/unit and, will have all re	quested documentation (see above) available fo contractors) of this assessment.			
Date Completed:				
Stand/Unit Responsible Person:				
Signature or type name:				
	Office Use Only			
Have all sections been comple		Approved for entry ont	o Exhibitors	List?
}		, rr	~~~~~	~~~~~

PUBLICITY FORM

Newspapers, magazines, radio and television stations are all keen to know what's happening at Hampshire's County Show. In the build-up to the Show, a regular flow of press releases, features and pictures are sent to the press which could feature your company. This publicity is free and if you do have any stories or awards to tell us about please complete the questions below and post it back to the Show Office.

Company Name:
What do you do?
Have you won any prizes/awards/competitions?
What is your Unique Selling Point?
TYTIAL IS YOUR OTHIQUE SEILING FORME.
Do you have any unusual stories about your company?
Are you having any competitions on your stand or any celebrities attending?
Will you be demonstrating at the Show?
Are you on Facebook,Twitter or Instagram? If so, please provide your details so we can link to you:
The you on racebook, white or instagram. If so, piease provide your decails so we can link to you.
Contact Name:
Telephone Number:
Email Address: