



Kilkivan Great Horse Ride Association Incorporated

PO Box 52

KILKIVAN QLD 4600

ABN: 53 670 490 124

Email: [kilkivangreathorseride@gmail.com](mailto:kilkivangreathorseride@gmail.com)

Website: [www.kilkivangreathorseride.com.au](http://www.kilkivangreathorseride.com.au)

# Kilkivan Showgrounds Stall Site Application Form

Saturday 1<sup>st</sup> April 2017 & Sunday 2<sup>nd</sup> April 2017

Applicant's Name: \_\_\_\_\_

Postal Address: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Proposed Products / Stall Description: \_\_\_\_\_

Is a vehicle onsite necessary for trading? Yes / No

Number of sites required



Site - \$ 40.00 per site \_\_\_\_\_ Site/s Required

---

## Terms & Conditions

- ❖ The Kilkivan Great Horse Ride Assoc Inc. Committee (to be known as "the committee" from here on in) reserves the right to refuse any stall booking.
- ❖ "The committee" reserves the right to remove from sale on the day any or all items that were not disclosed in the application.
- ❖ Stall holders must have their own **current public liability insurance**; additionally a Food Business Licence and product liability insurance must be held if relevant to the stall being involved. A copy of each document must be submitted prior to April 1<sup>st</sup> 2017.
- ❖ Stall site **allocations for Saturday** will be advised at the KGHR Inc. Information Desk situated in the **Lions Park (Bligh Street Kilkivan) from 8am Saturday 1<sup>st</sup> April 2017**. Directions to the Showgrounds & a map will be provided. Please ensure that you have completed set-up prior to 5.30pm on Saturday.
- ❖ The stall holder agrees to indemnify "the committee" against all liability claims, demands, expenses, fees, fines, penalties, law suits, proceedings and actions of any kind.
- ❖ The stallholder occupies & utilizes the site at their own risk, releasing "the committee" and the association from any liability from damage to the display, stall or any other property of the description: or for loss of income due to event cancellation or eviction due to the violation of any safety regulations.
- ❖ Site allocations will not be made until all insurance copies have been received and payment has been made.

I agree to the above-listed terms and conditions of this application:

Signature

Name

Date

I have made payment of \$ \_\_\_\_\_ by Cheque / Direct Deposit

Account Name: Kilkivan Great Horse Ride Assoc Inc  
Bank Details: BSB: 814282 A/c No: 3001 0313  
Direct Deposit: please use last name as reference

I have attached a Copy of Current Public Liability Insurance &, if applicable, Current Product Insurance &/or Food Business Licence.

---

Office use only

Amount Received: \$ \_\_\_\_\_ Cheque / Money Order / Bank Deposit (please circle)

Receipt Number: \_\_\_\_\_ Date: \_\_\_\_\_