



APPLICATION FOR TRADE STALLS

**NAME OF EXHIBITION:**.....

**DATE:** .....

**NAME OF EXHIBITING COMPANY**

**ADDRESS**

**NAME OF FASCIA BOARD**

**CONTACT PERSON**

**TELEPHONE**  **FAX**

**TAX INVOICE REQUIRED** YES  NO

**VAT REGISTRATION NO**

Stall Location	Rate	No. of Stalls	Stall Nos.	Total
<b>HALL 1</b>				
Prime Stalls	.....	.....	.....	.....
Other Stalls	.....	.....	.....	.....
<b>HALL 2</b>				
Prime Stalls	.....	.....	.....	.....
Other Stalls	.....	.....	.....	.....
			Advance Paid	
			Balance	