SHOPPING MALL APPLICATION FORM 6th & 7th JULY 2024

EXHIBITOR DETAILS	(PLEASE USE BLOCK CAPITALS)	Office Use only
Name of Company		
Contact Name		
Address including postcode		
Contact phone numbers		
Name & phone number of person on duty at Show		
Web site & e mail address		
Brief Description of your product, which will appear in the Show Programme (approx 10 words)		

SIZE OF SHOPPING MALL SPACE REQUIRED

TENTED SPACE WIDTH & DEPTH	COST PER STAND (to include Wifi Coverage)		TOTAL £ Please Note: Applications will not be processed without full payment					
3M X 2M	SOLD OUT		£					
6M X 2M	SOLD OUT			£				
9M X 2M	SOLD OUT			£				
			SENDING Full Payme	ENDING SUBTOTAL £ VAT @ 20% £ ull Payment Required				
Account 00885566 Sort Code 309206 With Application Form £ Please tick as a checklist to confirm you have sent the necessary forms								
Gas Safety Certificate (if applicable)	PAT Certificate for any electricals	Risk Assessment		Insurance, Public & Employers Liability (where applicable)				
Signature of Exhibitor Date Save paper. E mail to info@cotswoldshow.co.uk and we will email receipt of application. Thank you								