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| |  | | --- | | Full Name: ………………………………………………………………………………………………………….…...  Business Name: …………………………………………………………………………………………………………  Address: ………………………………………………………………………………………………………………...  …………………………………………………………….…………… Postcode:……………………………………  Telephone: …………………………..………...……… Mobile: ………..…………………………………………….  Website: ………...………………………………………………………………………………………………………  Email: …………………………………………………………………………………………………………………... | | |
| **ALL STALLS ARE £25.00 FOR THE TWO DAYS (Except table 20 - which is £35.00)**  **Price includes a 6’ table and 2 chairs N.B Monies will be returned on the night** | |
| **Stand Number Required:**    Choice #1    Choice #2  Choice #3 | **Deposit Amount Required: Stand cost**  Bank details:  Lloyds TSB  Account 30650368  Sort Code: 30.97.44 |
| |  | | --- | | **Please give a clear and thorough description of your stand**. You may only conduct the activities on your stand which you state on this form. Please also inform us if additional space is required next to your stand for rails, racks, pull up signs etc.  **N.B. All goods must comply with trading standards, EU and United Kingdom rules. All goods on display are original, trademarked and copyright protected.** | | |
| |  | | --- | | **Additional Information** | | |

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| **Declaration:**  **Please tick to confirm each statement.**  I confirm that I have read and agree to abide by the terms and conditions in relation to this  booking.  I have enclosed copies of relevant **Insurance, Disclaimers and PAT testing certificates** as  detailed in the Terms and Conditions.  I confirm that I will send my insurance details by email to  theteam@ghostwalkshull.co.uk within 7 days of sending this booking form.  Signed: ...................................................................................................................................  **PAYMENT**  Please return this form with your signed Declaration  Payment should be made via the Ghost Walks Hull website at http://www.ghostwalkshull.co.uk/ghostwalk halloween festival exhibitor bookings.html  If paying by cheque made payable to **‘Psychic Rendezvous’** to the address above.  Payment via Bank transfer to the account details on page 1 with your company name as reference.  Or  If you wish to pay by Credit Card, you can call pay by telephoning 07887 551069 or please supply an email address below, if different from above, and a request for payment will be made, via PayPal, to your nominated email address upon receipt of this booking form. **PLEASE NOTE: BOOKING FEE APPLICABLE**  **Email Address : ........................................................................................................................................................................** |