

## Stall Holder Information Sheet

Rapid Creek Markets

To be completed by all stall holders and returned to Margaret by end of trading Sunday.



Name:

Address:

Phone:

Mobile:

Fax:

Email:

Past Stall Number:

Stall Size (metres needed):

Stall Category: (please circle one)

**Service**

**Food**

**Craft**

**Produce**

Products/Services:

Are you interested in participating in a Friday Night Market commencing November? (please circle one)

**Yes**

**No**

Are you interested in participating in the Christmas Craft Fair? (please circle one)

**Yes**

**No**

Do you want to receive Further Notices on these Events? (please circle one)

**Yes**

**No**

By: (please circle one)

**Phone**

**Fax**

**Mail**

**Email**

**Newsletter**

