

Lechlade Collectors Club

23rd/24th/25th May 2020

**Craft
Booking
Form 20**

NOW at Langley Farm, Langley Lane, Clanfield, Oxon OX18 2RZ

Invitation to 6th Lechlade Annual Vintage Rally & Country Show

Please complete the Form and return with appropriate documents, please make cheques payable to **Lechlade Collectors Club**, post form with A5 "STAMPED SELF ADDRESSED ENVELOPE"

To: - Stalls Coordinator, PO Box 387, Carterton, Oxon. OX18 9DL

Bank details:- Lloyds | Acc No 74695260 | Sort Code 30-99-78 |
Telephone: 01993843221 (leave message), e-mail info@lechladecollectorsclub.co.uk

- Entry forms to be completed and payment made by May 4th 2020
- All stalls must have their **own public liability insurance**.
- Please enclose a copy of **Insurance** with your entry form, and **Food Handling Certificates**. (If Applicable)
- Insurance Certificates must be available for inspection by any Official of LCC. on the day of trading.
- ALL TRADERS ARE REQUESTED TO BE ON THEIR PITCH BY 9.00AM AND NOT LEAVE BEFORE 5.00pm on all days** to avoid conflict with the Public.
Site available from **9.00am** Fri 22nd, **7.00 am** Sat 23rd/Sun 24th/Mon 25th to **10.00 am** Tues 26th May 2019
- Passes will be posted on completion of application forms. Transactions & **Refunds** after 12th May 2019.
by arrangement with the Committee.
- All Vans, Trailers, Caravans, Cars, Gazebos, Marquees, Guy Ropes, Towbars, Generators, and Tables & Chairs **MUST** be kept within your allocated Pitch.

CUT
&
POST

Whole weekend Rate (3 days)	2 Day Rate	1 Day Rate
1 x Table space with OWN Table £25.00 (tick) <input type="checkbox"/>	1 x Table space with OWN Table £18.00 (tick) <input type="checkbox"/>	1 x Table space with OWN Table £10.00 (tick) <input type="checkbox"/>
1 x Table space with OUR table £27.00 (tick) <input type="checkbox"/>	1 x Table space with OUR table £20.00 (tick) <input type="checkbox"/>	1 x Table space with OUR table £12.00 (tick) <input type="checkbox"/>
How many tables (number) <input type="checkbox"/>	How many tables (number) <input type="checkbox"/>	How many tables (number) <input type="checkbox"/>
Electric £6.00 (yes or no) <input type="checkbox"/>	Electric £4.00 (yes or no) <input type="checkbox"/>	Electric £ 2.00 (yes or no) <input type="checkbox"/>
	SAT (tick) <input type="checkbox"/> SUN (tick) <input type="checkbox"/> MON(tick) <input type="checkbox"/>	SAT (tick) <input type="checkbox"/> SUN (tick) <input type="checkbox"/> MON (tick) <input type="checkbox"/>

Copy of Insurance enclosed (tick)
Food handling certificate(tick or N/A)
CPSR (soap & toiletry makers) tick/N/A

Name _____

Address _____

FEE you are sending _£_____

Goods you are selling _____

Post code; _____

Telephone Home _____

Mobile _____

E:Mail _____

Vehicle Registration number(s), _____

UNDER THE FREEDOM OF INFORMATION ACT. I REQUIRE YOUR PERMISSION TO HOLD YOUR ADDRESS ON MY DATABASE. THE ONLY INFORMATION I WILL KEEP IS WHAT IS ON YOUR FORM IE; FULL NAME AND ADDRESS AND PHONE NUMBER/ E-MAIL .PLEASE SIGN BELOW

LCC. Committee nor any of their servants or agents will not be responsible for any injury (fatal or otherwise), loss or damage to any person's, animal's, vehicle's, exhibit's or any property, however caused in connection with the show and those Concerned shall be deemed to have accepted this condition.

Signature _____

Print name _____

Date _____

OFFICIAL USE ONLY
Stall Number _____

No of Vehicle pass required _____

No of Wrist bands required _____

Name's of People on your pitch _____