

Market Stallholder Application



Thank you for your interest in becoming a stallholder at the Katherine Community Markets.

ALL relevant sections **MUST** be completed. Incomplete forms will not be accepted.

What to do when completed

- ✓ Scan and email to info@katherinemarkets.com.au
- ✓ OR Post to PO Box 1991 Katherine NT 0851

Questions

If you have any questions relating to the application please email info@katherinemarkets.com.au or contact via Facebook messenger

Section 1 – must be completed by ALL applicants

APPLICATION TYPE	
Type of Application	<input type="radio"/> New <input type="radio"/> Renewal

Section 2 – must be completed by ALL applicants

APPLICANT INFORMATION	
Applicants Name	
Stall Trading Name	
Phone Number	
Mobile Number	
Email Address	
Preferred Contact Method	<input type="radio"/> Phone <input type="radio"/> Mobile <input type="radio"/> Email

Section 3 – must be completed by ALL applicants

STALL PERMIT INFORMATION	
I wish to register and obtain a stall permit as a:	<input type="radio"/> Permanent <input type="radio"/> Casual
When do you intend to commence at the markets?	
Stall insurance is MANDATORY , and without a copy of your insurance you cannot proceed with having a stall at the Katherine Community Markets. (Please attach a copy of your insurance)	

Section 4 – must be completed by ALL applicants

STALL AND PRODUCT INFORMATION	
Briefly describe the kind of items you intend to sell at your market stall:	
What size do you expect your stall to be?	<input type="radio"/> Card Table <input type="radio"/> 3 x 3 metres <input type="radio"/> Other
Do you intend to sell your product from the back of a vehicle or trailer?	<input type="radio"/> YES <input type="radio"/> NO
Will you require power?	<input type="radio"/> YES <input type="radio"/> NO
It is up to stall holders to make sure ALL electrical equipment is tested and tagged. Failure to do so will mean you'll be asked to leave the markets immediately and won't be able to return to the Katherine community markets	
Will you be hiring any of the following from KCM:	<input type="radio"/> Gazebo <input type="radio"/> Umbrella <input type="radio"/> Table

Section 5 – to be completed by applicants wishing to raise funds or provide information to the community

FUNDRAISING AND COMMUNITY GROUP INFORMATION	
Are you raising funds for a charity or not-for-profit organization?	<input type="radio"/> Yes <input type="radio"/> No
What will be your primary form of fundraising?	
Does your organization provide information for the community?	<input type="radio"/> Yes <input type="radio"/> No
If yes what is the primary information you will be providing to the community?	
Will you be undertaking a survey?	<input type="radio"/> Yes <input type="radio"/> No
Is your organization a political or religious group?	<input type="radio"/> Yes <input type="radio"/> No
If yes please advise which political or religious organization you are affiliated with	

Section 6 – must be completed by ALL applicants

ACKNOWLEDGMENTS	
Have you read and understood the application guidelines?	<input type="radio"/> Yes <input type="radio"/> No
Have you completed ALL relevant sections of the application?	<input type="radio"/> Yes <input type="radio"/> No
Have you read and understood the KCM pricing schedule?	<input type="radio"/> Yes <input type="radio"/> No
Have you read and understood the market rules?	<input type="radio"/> Yes <input type="radio"/> No
Have you attached any relevant registrations or certificate of currency that you hold?	<input type="radio"/> Yes <input type="radio"/> No

Your Full Name: _____

Signature: _____ Date: _____