



Trade Vendor Application Form

This application form is to be used for any Trade Vendor Applications. Please complete the following details and submit to the All Ford Day SA Team by email allforddaysa@gmail.com.

The All Ford Day Team reserve the right to assess the application and either approve or decline based on the Event requirements. If approved, the Vendor will be notified and payment processed. Potential Trade Vendors are encouraged to contact the All Ford Day Team prior to submitting an application form.

Business Details:

Business Name:			
Contact Name:		Position:	
Mailing Address:			
Suburb:			
State:		Postcode:	
Contact Email:		Contact Phone Number:	
Brief description of your Business and any Items for Sale:			

Event Requirements:

Please indicate the size of the area that you will require and any additional requirements:

☐

\$75 - Small

3m x 3m, No Car

☐

\$200 - Standard

8m x 4m

☐

\$250 - Large

12.5m x 7.5m

Alternative Size Required: (Only required if one of the above is not suitable)		
Does your site require power: (Please indicate no. and size of outlets required)		
Do you have Public Liability Insurance (*Required): (Please provide a copy with your Application Form)		
I would be interested in providing the following: (Optional - Select options and we will contact you to discuss)	<input type="checkbox"/> Raffle Prizes	<input type="checkbox"/> Entrant goody bag materials (Flyers, brochures, samples, vouchers, business cards, etc.)

www.allfordday.net.au

Entry Director: 0476 297 455

Event Director: 0402 965 154

PO BOX 1003

Prospect East, SA 5082



September 22, 2019

Bonython Park

Port Road, Adelaide

allforddaysa@gmail.com

Trophy Sponsorship:

A number of trophies are available for sponsorship by the attending Trade Vendors at a cost of \$60.00 each. If you wish to sponsor one or more trophies please indicate below. All trophy allocations will be randomly drawn before the event.

Trade Stall: (Small - \$75 ; Standard - \$200 ; Large - \$250)	\$
Trophy Sponsorship: (\$60 per Trophy)	\$ _____ X \$60.00
Total Payment Required:	\$

Payment Details:

Please indicate your payment method and provide any required details.

☐ Visa ☐ MasterCard ☐ PayPal ☐ Cheque / Money Order

Cardholder Name:	
Card Number:	
Card Expiry Date:	
Signature: (by completing these details you are authorising payment)	

PayPal Account:	allforddaysa@gmail.com (Please include your Business Name as the Reference)
Cheques / Money Orders Payable:	All Ford Day
Send form and payment to:	All Ford Day PO BOX 1003 Prospect East, SA 5082

