



SUNDAY MARKET
STALLHOLDER APPLICATION FORM

CONTACT DETAILS

Name of applicant/Associate.....

(NB: a separate application is required for each maker)

Company (if applicable):

ABN Number (if applicable):

Address (all correspondence will be sent to this address):

.....

.....

.....Postcode:

Telephone (during business hours):

Mobile: Fax:

Email/website:.....

Application for new stall
(complete all sections)

Application for variation of product (for existing stallholders)
(complete sections 2 – 4)

1. HOW DID YOU HEAR ABOUT THE SUNDAY MARKET?

- Advertisements The Age The Herald Sun
 Radio Leader Newspapers
 A current stallholder
 Personal visit
 Other (please specify):

Please note: We are currently not accepting applications for jewellery, photography, wool products, beaded items, skincare and bags.

2. PRODUCTS

Please note: All products sold at The Sunday Market MUST be made by the applicant(which is the stallholder) personally and made in Australia.

ITEMS	PRICE RANGE	SOURCE *

- * Source codes:
- A = made by me personally
 - B = made by me and/or family (please specify in question 4)
 - C = made by others to my design
 - D = purchased and processed or painted by me
 - E = purchased from others

3. SAMPLES OF PRODUCTS

Applicants should provide physical samples of the product. These can be either mailed (*please include a self-addressed stamped padded post pack otherwise you may need to collect the sample*) or personally delivered to the Sunday Market office (*if the office is closed samples can be left with the stage door keeper in Hamer Hall*). You should also enclose high quality photographs that show both range and quality of products to be sold.

The August Selection meeting will be on 3 August, samples and forms must be here by 31 July.

6. STATUTORY DECLARATION:

I,, being the applicant for a licence to operate a Stall at The Sunday Market, hereby declare and acknowledge and agree that:

1. The contents of the Application are true and correct in every particular;
2. I have read the terms specified in the Information Sheet which has been provided to me and agree to comply with those terms;
3. I will do all the things necessary to assist The Trust in deciding whether or not to approve this Application including providing to The Trust samples of the products and raw materials;
4. I shall, upon this Application being approved by The Trust, sign the Stallholder's Agreement within 7 days of having received it from The Trust.

I acknowledge that this declaration is true and correct and I make it in the belief that a person making a false declaration is liable to the penalties of perjury.

DECLARED at in the State of Victoria this day

of..... ,
20.....

APPLICANT'S SIGNATURE:

Before me:

WITNESS' SIGNATURE:

FULL NAME:

ADDRESS:

OCCUPATION:

(Justice of the Peace, Commissioner for Declarations, Doctor, Chemist, Police Officer, Solicitor, Accountant, etc)