

# KALAMUNDA FARMERS MARKET

## Payment of Stall Fees

Contact Name \_\_\_\_\_  
Business Name \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Mobile \_\_\_\_\_ Email \_\_\_\_\_  
Business Address \_\_\_\_\_  
Postal Address \_\_\_\_\_

I will be attending the markets as a stallholder on the following basis:

Weekly  Monthly  
 Fortnightly  Seasonal

Commencing on the \_\_\_\_\_  
(Insert Date – must be a Sunday)

Stallholders are entitled to a 3 metre x 3 metre space. If you require more space you will need to rent additional stalls. Please specify number of spaces required:  1  2  3

Do you require a powered site? (\$5 fee applicable)  YES  NO

Stall fees must be paid two markets in advance and monies must be received by Market Manager by no later than the Friday prior to the Sunday market being attended.

An invoice will be sent to the email address (or postal address if no email listed) as notified above. Fees are payable in weekly, fortnightly, monthly or yearly instalments and rates calculated as per the frequency the stallholder will be attending the markets, as outlined in the Market Rules/4.0 Fees, for the current financial year. Please indicate the frequency you would like to pay your stall fees;

Weekly  Monthly  
 Fortnightly  Yearly

Please specify the payment method you will be using:

Cheque  Cash  EFT (send remittance)  Credit Card \*

\*Credit Card Details:

Card Name \_\_\_\_\_  
Card Number \_\_\_\_\_  
Expiry Date \_\_\_\_\_ / \_\_\_\_\_ Signature \_\_\_\_\_

### Declaration

I have read and understood the terms and conditions outlined in the Market Rules document and agree to abide by them.

I acknowledge that the details I have provided on this form are true and correct.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Completed forms should be returned to;  
Att: Market Manager, Kalamunda Farmers Market, PO Box 417, Kalamunda WA 6926  
Or Email: farmersmarket@kalamundachamber.com