



Exh. No.

REGISTRATION FORM
Tuesday 25 October to Saturday 29 October 2011

Name of Exhibit (or): _____

Full Name of Contact Person: _____

Full description of articles: _____

Postal Address: _____

Physical Address: _____

Telephone numbers: (h) _____ (w) _____ Cell: _____

Fax number _____ E-mail Address: _____

Bank Details

Name of Account Holder: _____ Type of Account: _____

Bank: _____ Branch: _____ Branch Code: _____

Account Number: _____

Estimated Quantity of price tags: _____

Display Unit: _____

Any merchandise not screened by the Penryn Christmas Market screening committee will not be displayed at the Penryn Christmas Market.

Registration Fee - R 350.00 which includes the first 500 price labels, thereafter an additional fee of R 0.10c per label will be charged which will be recovered at the end of the Market.

I understand and accept the requirements set out in the *Exhibitor Pack Letter* of the Penryn Parents Association.

Exhibitor Signature: _____

Please Deposit your Registration Fee:

Penryn Christmas Market, Nedbank, Riverside, Account number: 1739 008 936, b/code: 173 952, ref: YOUR Exhibitor No.

Please email a copy of your deposit slip and registration form to: **or Fax: 0866 706 169**

| Market Use Only | |
|-------------------------|--|
| Registration Fee Amt Pd | |
| Type of payment | |
| Exhibitor Pack Sent | |
| Exhibitor Allocation | |