



**PROSERPINE AGRICULTURAL, PASTORAL & INDUSTRIAL
ASSOCIATION INC.**

ABN: 45548895172

GROUNDSPACE APPLICATION
Friday 23rd and Saturday 24th June 2017

**MUST BE LODGED WITH PAYMENT BY
30th MAY 2017 TO SECURE SITE
MUST INCLUDE COPY OF CURRENT PUBLIC
LIABILITY AND OTHER RELEVANT INSURANCES FOR THIS APPLICATION**

Due to extreme damage caused by Cyclone Debbie recently, we will be unable to supply power. We therefore request that, if you are still attending, that you will have to supply your own power for this year's Show Whitsunday.

TRADING NAME: _____ PROPRIETORS NAME: _____

ADDRESS: _____

TELEPHONE: (Must Supply) _____ EMAIL ADDRESS: (Must Supply) _____

TYPE OF PRODUCTS SHOWN OR SOLD: _____

DO YOU REQUIRE: POWER – NO POWER AVAILABLE

WATER YES/NO

ANY OTHER REQUIREMENTS: _____

SIZE OF AREA REQUIRED: FRONTAGE: _____ DEPTH: _____

PRICE: \$100.00 for first 3 metres + \$25.00 per metre frontage over 3m {inc GST} (Please see attached camping form)

NO OF YEAR'S ATTENDANCE THIS SHOW: _____ years

DETAILS OF VEHICLES ATTENDING INCLUDING DESCRIPTION:

CARS _____ TRUCKS _____

CARAVANS _____ TRAILERS _____

I/we hereby agree to be bound by the articles, conditions and rules of the Proserpine Agricultural, Pastoral and Industrial Assoc. Inc.
I/We agree to attach a copy of current public liability and other relevant insurance policies to this application
I/We agree to obey any directions that may be given by the above Association's committee with regard to safety and health issues.

By signing this form, I/We are acknowledging perusal of the Site Contract and Rental Conditions of the Proserpine A. P. & I. Association Inc.

Contact Person: _____ Signature: _____ Date: _____

Please make cheques payable to:-
PROSERPINE AGRICULTURAL, PASTORAL & INDUSTRIAL ASSOCIATION INC.
PO Box 150, PROSERPINE 4800 PHONE: 07 49451126 / 07 49475820
EMAIL: squan2@eq.edu.au

BANK DETAILS: BSB - 034-207 Account # - 750138
Account Name - Proserpine Agricultural Pastoral & Industrial Association Inc.

(Please include an understandable reference)

(Please email notification of deposit immediately to helenwright@farmhq.org)

**2017
CAMPING
FORM**



Please complete details if you intend on camping at the Proserpine Showgrounds during the Annual Show Period

Trading Name: _____

Contact Name: _____

Contact Phone: _____ On Site

Camp Site Size: _____ approx

Date of Arrival: _____ Date of Departure: _____

Vehicle Registration: State: _____ Number: _____

Camping Site Fee \$15 per night/site Total Fee: \$ _____

PLEASE NOTE:

Camping is only available in the designated camping area. No camping is permitted in the trade area.

Office Use Only

Camping Fee _____ Inv/Receipt # _____ Date ___ / ___ / ___