APPLICATION FORM

SOUTHERN CO-OPERATIVE FOOD PAVILION

**ROYAL ISLE OF WIGHT COUNTY SHOW**

**Sunday 30th August 2020**

Dear Trader,

Thank you for your interest in the 2020 Royal Isle of Wight County Show.

The Food Pavilion is an integral part of the Show and celebrates the best of Isle of Wight food. We are pleased to attach the details and application form.

Feedback from our visitors shows us that their shopping experience is an important part of their day. We are working hard to enhance this for our visitors and for you, our traders. As part of this, stands within the Food Pavilion will be judged and prizes awarded. Stands will be judged on:

\* Presentation. \* Originality of design.

\* Welcome, staff representation and customer service. \* Would it entice you to buy/participate?

Judging will take place throughout the day from 9am.

Please supply as much detail as possible about your stand. We are also asking for a photograph of your stand with your application. This will enable us to ensure a good flow within our trade areas so that the public has the best possible access and experience throughout the day.

**PLEASE COMPLETE ALL SECTIONS OF THE FORM**

Please do not send any money with your application. Should your application be approved an invoice will be raised and sent to you. The invoice acknowledges your booking and reserves your space at the Show.

Nearer the time, you will be sent an Exhibitor’s Pack with details of your stand, your tickets and vehicle passes.

Please note full payment of your invoice must be made within 30 days, or no later than 5 days before the date of the show (whichever is sooner) otherwise your reserved space may be re-let.

When selecting your stand size you must include space for any guy lines, units or vehicles parked on the site.

Please complete all sections of this form and return it to [riwas@naturalenterprise.co.uk](mailto:riwas@naturalenterprise.co.uk)

**Return address: IW County Show, Shide Meadows Centre, Shide Road, Newport, Isle of Wight PO30 1HR.**

**Early booking discount for applications sent in by 31st March 2020.**

**Closing date for applications: Friday 14th August 2020.**



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| **ROYAL ISLE OF WIGHT COUNTY SHOW 2020**  **FOOD PAVILION BOOKING FORM** | | | |
| **Company name** | | | |
| **Nature of business** | | | |
| **Address** |  | | |
|  |  | | |
| **Postcode** |  | | |
| **Contact name** |  | | **Phone number** |
| **Contact email address** |  | | |
| **Lead name attending on Show day** | |  | |
| **Mobile phone number for Show day** | |  | |
| **Description of your stand and products on display/activities taking place.** | |  | |
| **Please include a photograph of your stand so that we can ensure a good experience for visitors throughout the Show.** | | | |

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| **Food Pavilion Trade Stands (Space includes 6’ table)** | | | |
| **Early Bird Offer (until 31st March 2020)** | **Standard Rate** | **No. Required (Maximum 3)** | **Total** |
| **£65** | **£85** |  |  |
| **Electricity Required** (please add more as required) | **£40** per 16 amp (= 1 double socket) |  |  |
| **\* Wight Marque Members Food Pavilion** | | | |
| **Early Bird Offer (until 31st March 2020)** | **Standard Rate** | **No. Required (Maximum 3)** | **Total** |
| **£48.75** | **£63.75** |  |  |
| **Electricity Required** (please add more as required) | **£40** per 16 amp (= 1 double socket) |  |  |

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| **Number of entrance tickets required (2 included with booking, with additional tickets £11 per ticket in advance, or £12.50 on the gate)** | **No. Required** | **Total** |
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| **Advertising** | **Standard Rate** | **\*Wight Marque Members** | **Total** |
| Display one banner in the Main Ring | £50 | FREE |  |
|  | **TOTAL AMOUNT PAYABLE** | |  |

\* To find out more about the Wight Marque scheme please visit [www.wightmarque.co.uk](http://www.wightmarque.co.uk/) or telephone 0845 226 9098.

### **FOR OFFICE USE ONLY**

Received (date) ……………………… Invoice Number …..……………………… Electricity Required Yes / No

Size of stand ……….………… Ticket Allocation ……… Extra ………. Advert Size ………………. Colour / B&W Banner Space Qty ……………….. **STAND NUMBER**………………

Further information required? Yes/No Approved traders list? Yes/No Pack sent ………………………..

|  |  |
| --- | --- |
| **YOUR CHECKLIST** | |
| **Photograph of your stand** (email is acceptable) |  |
| **Application form** |  |
| **Risk assessment** |  |
| **Copy of insurance certificate**  (Please ensure it is valid for the date of the Show) |  |

All parts of this form must be fully completed by all exhibitors / traders and caterers and be returned to the Show Office. Where evidence is requested (i.e. Public Liability Insurance), this must be available for inspection at all times whilst on site.

We collect and hold your information in accordance to the General Data Protection Regulation (GDPR). Please see the Royal Ilse of Wight Agricultural Society’ Privacy Policy – see www.riwas.org.uk.The policy clearly sets out how we collect and process your personal data, for what purposes we use it, the legal grounds of processing such data, how we keep your it secure and your rights in relation to such data.

In support of the County Show there is an opportunity for our partners to advertise in the local press. If you do not want us to share your details with the press please tick the box below.

**It is your responsibility** to ensure that suitable and sufficient risk assessments are carried out to cover your operations and activities at our Show. You are also required to consider the risk of fire within your stand / structure. Failure to comply with a reasonable health and safety precautions, may result in you being removed from the site.

**All exhibitors are required to have full Third Party & Public Liability Insurance and must enclose copy of their current certificate. Completed risk assessments must also be submitted as indicated.**

**I / We agree to abide by the Terms and Conditions of the Show as set out on page 4.**

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

Please print name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

For all booking enquiries please telephone 0845 226 9098 or email [**riwas@naturalenterprise.co.uk**](mailto:riwas@naturalenterprise.co.uk)

**Please return your competed** form either to [riwas@naturalenterprise.co.uk](mailto:riwas@naturalenterprise.co.uk) **or post to**

**RIWAS Shide Meadows Centre, Shide Road, Newport PO30 1HR**

For Terms and Conditions please see page 4.

**Terms & Conditions for Traders and Exhibitors**

1. The Show organisers reserve the right to accept or decline applications for Trade or Exhibition space and also determine the allocation of tent and site positions. The Chairman’s decision on all matters shall be final and binding. Bookings will not be accepted until full payment is received (no post-dated cheques please).

2. There can be no unauthorised raffles, collections, or games of chance. No flyers or advertising material to be distributed around the showground or put on vehicles.

3. All traders and exhibitors are required to have full third party and public liability insurance - please supply copy certificate with application.

4. All Traders and Exhibitors are responsible for the security of their property at all times.

5. All Traders, Exhibitors, and their staff must be in possession of a valid entry pass for the Show.

6. No part of the stand or exhibit should extend beyond the front of the allocated area. If you bring your own tent, you should apply for enough space to accommodate this. Please keep to the marked areas allocated to you.

7. All vehicles belonging to Traders, Exhibitors, and their staff must parked in the allocated parking area adjoining the main entrance.

8. Setting up may take place between **13:00 & 17:00 hrs on Saturday 29th August.**

9. **There will be no vehicle movement allowed on the site between 08:00 and 17:30 hrs on the day of the Show.**

10. Taking down may not begin before **17:00 hrs on Sunday 30th August, and must be completed by 12:00 noon on Monday 31st August.**

11. Traders and Exhibitors must at all times have due regard for public safety. All thoroughfares must be kept clear of obstructions. ALL exhibitors must comply with the relevant Health and Safety requirements. Completed general and fire risk assessment forms should be submitted by 27th July 2020, at the latest.

12. **Traders are not permitted to use their own generators.** Electricity can be requested at an additional charge. **If you request electricity on the day of the show without pre-booking you will be charged £50 which will be collected by the Electrician on the day.**

13. Please note that there must be NO SMOKING in any enclosure to which the public is admitted, including tents, marquees, toilets, etc. Your co-operation in this is appreciated.

14. Cancellations notified up to 30 days prior to the Show will be subject to a charge of 50% of the fee paid. There will be no refund for cancellations after this date. Should the Organisers cancel or curtail the Show, for reasons beyond their control, no refunds will be made.

15. Please remember that the officials are unpaid volunteers and also wish to enjoy the Show. The Committee will fully support the officials in carrying out their duties, and any person not complying with these conditions will be ordered to leave without compensation.

General Risk Assessment

**ROYAL ISLE OF WIGHT COUNTY SHOW**

**Sunday 30th August 2020**

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| Date: |
| Company Name: |
| Contact Name: |
| Mobile No: |

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| **A People/Persons at Risk – Numbers at Risk** | | | | | | | | | | | | | | | | | | | | |
| Employees/Staff | | |  | Contractors | | |  | | | Public | | |  | | | Show Staff | | |  | |
| **B HAZARDS** | | | | | | | | | | | | | | | | | | | | |
| Structure |  | Access/Egress | | |  | Vehicle movements | |  | Mechanical | |  | Manual handling | |  | Biological agents | |  | Lone Working | |  |
| Animals |  | Housekeeping | | |  | Electrical | |  | Lifting | |  | Noise | |  | Violence & Aggression | |  | Working at height | |  |
| OTHERS - SPECIFY | | | | | | | | | | | | | | | | | | | | |

**C**

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| **Task/Activity** | **Hazard** | | **Existing Control Measures** | **Initial Risk H/M/L** | **Adequately controlled** |
| List significant steps in job/task | Describe all hazards identified and their effects for each task | People at risk | Describe fully all controls applicable for each hazard. All controls must be valid in that they reduce severity, likelihood or both | Classify risk rating from matrix for each hazard | Yes/No |
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If you need extra space, please attach separate sheet.

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| Have you identified all ignition sources and ensured that they are kept away from all flammable materials? | **Yes** | **No** | | **N/A** |
| Do you plan to use LPG? | **Yes** | | **No** | |
| Does your stock necessitate a full fire risk assessment questionnaire? | **Yes** | | **No** | |

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| **Risk assessment Circulation list (tick box)** | | | | | |
| **Employees** |  | **Management** |  | **Contractors** |  |
| **Other – Specify:** | | | | | |
| **Assessor:** |  | **Date Assessed:** |  | **Review Timescale:** |  |
| **Signature:** | | | | | |

**Guidance on completing General Risk Assessment**

**Table A**

**Those affected**: Any person who may be affected by the work must be identified. Should there be categories of persons not listed, enter them in the boxes provided.

**Table B**

Hazards: Identify the hazards inherent to the activity being assessed, by putting crosses in the appropriate boxes. The list provided is not comprehensive. Should there be hazards that are not listed then enter them in the boxes provided.

Note: The definition of a **HAZARD** is: something with the potential to cause harm.

**Table C**

**Hazards**: List the hazards identified in Table B

**Existing Control Measures**: Outline the existing measures which will reduce the risk arising from each of the hazards listed. Check that they meet legal requirements, industry standards and represent good practice. Typical control measures include: safe design; preventing access to the hazard e.g. guarding; written procedures and instructions; training; provision of PPE etc.

**Risk**

Assess the risks arising from the hazards identified, using the criteria set out below. Consideration must be given to what is reasonably foreseeable in relation to the identified hazards and recognition of any existing control measures that reduce the risk. Enter the appropriate letter, L for low, M for medium or H for high. If the overall risk category is low, then the assessment is complete and the form circulated to those affected. However if the overall risk category is medium or high, then Additional Control Measures are required (see below).

**Note**: The definition of a **RISK** is: the likelihood that harm from a particular hazard will occur and the consequences.

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| **MATRIX** | **LIKELIHOOD** | | |
| **SEVERITY** | Certain or near certain to occur | Reasonably likely to occur | Unlikely to occur |
| Fatality; major injury or illness causing long term disability | HIGH | HIGH | MEDIUM |
| Injury or illness causing short term disability | HIGH | MEDIUM | LOW |
| Other injury or illness | MEDIUM | LOW | LOW |
| **RISK** | | | |