



B O S T O N

BOROUGH COUNCIL

Municipal Buildings, West Street, Boston, Lincolnshire, PE21 8QR

Charity Market Stall Booking Form

Please complete this form and return it to the Markets Officer at Boston Borough Council, enclosing a copy of your organisation's Public Liability Insurance, or a letter from your insurers stating that your policy covers your organisation to operate a market.

| | |
|---|-------------------------------------|
| Contact Name(s): | |
| Address: | |
| Postcode: | |
| Email: | |
| Contact Number | |
| Title of Charity/Voluntary Organisation benefiting from income from market stall: | |
| Charity Registration Number (Please supply a copy of Registration Number): | |
| Brief outline of work Undertaken in Boston: | |
| What goods will you be selling: | |
| Date stall required: | |
| Is this your first charity Stall booking this year? | YES/NO If no date of last stall: |



[Type text]

All charities/organisations taking a stall or pitch at any time do so on the basis of Boston Borough Council's Terms and Conditions of Letting, which the Charity/Organisation confirms by signing this form that they have read and agreed to and will abide by.

Signed..... Date.....

Please note; provision can be made for charity stalls on Saturday markets only. This form should be returned duly completed within 21 days of receipt.

Guidance Notes

1. Organisation must complete a copy of their Public Liability Insurance or a letter from their insurers before any booking can be confirmed.
2. Organisations must submit a copy of their Charity Registration Certificate before any booking can be confirmed.
3. The cost of the first stall booked by a charity in any given financial year will be free. Any further stalls in the same financial year will be payable at the current market rent.
4. The sale of alcohol is forbidden.
5. If you wish to have a tombola, there must be a prize every time.

For Official Use only

| | | |
|----------------------------|--------------------------------|--------------------------|
| Public Liability Insurance | <input type="checkbox"/> | <input type="checkbox"/> |
| Booking Confirmed | <input type="checkbox"/> | <input type="checkbox"/> |
| Charity Registration Form | <input type="checkbox"/> | <input type="checkbox"/> |
| Date | _____ | |
| Date of Booking | _____ | |
| First Stall | _____ <input type="checkbox"/> | |
| Date of Last Stall | _____ | |