

# MURIWHENUA WELLBEING FESTIVAL 2024

# REGISTRATION OF INTEREST FOR PUBLIC STALLS

Please fill out this form to express your interest in setting up a public stall at the Muriwhenua Wellbeing Festival - 12 October 2024 from 9am - 3pm. Your responses will help us in organising the event effectively.

STALLHOLDER DETAILS	
Full Name:	
Contact Number:	
Email Address:	
Business / Organisation Name (If Applicable):	
Address:	

  

STALL INFORMATION	
Type of Stall:	Food & Beverage <input type="checkbox"/> Arts & Crafts <input type="checkbox"/> Clothing/Apparel <input type="checkbox"/> Health Products/Services <input type="checkbox"/> Information/Education <input type="checkbox"/>
	Other (please specify)

  

DESCRIPTION OF GOODS / SERVICES OFFERED:	
Provide a brief overview of what you will be offering at your stall	

  

PROMOTIONAL OPPORTUNITIES	
Would you like to include promotional materials (flyers, samples, etc.)?	Yes (Please attach a copy) <input type="checkbox"/> No <input type="checkbox"/> If Yes, please provide details:
Any additional comments or requirements:	

## SPACE AND EQUIPMENT REQUIREMENTS

Space required:	3M X 3M <input type="checkbox"/> 6M X 3M <input type="checkbox"/> Other (please specify)
Do you require table or chairs?	No <input type="checkbox"/> Yes <input type="checkbox"/> Specify the number of tables / chairs:
Power supply needed:	No <input type="checkbox"/> Yes <input type="checkbox"/>
Other equipment needs:	Tent/Canopy <input type="checkbox"/> Audio/Visual Equipment <input type="checkbox"/> Other (please specify)

## HEALTH AND SAFETY

Food stallholders: do you have a current food safety certificate?	Yes (Please attach a copy) <input type="checkbox"/> No <input type="checkbox"/> Not Applicable <input type="checkbox"/>
Any specific health & safety requirements: <i>(Please include any relevant details)</i>	

## AGREEMENT

By submitting this form, you agree to adhere to the festival guidelines and participate in a manner that supports the wellbeing and safety of all attendees.

**SIGNATURE:**

**DATE:**

Thank you for your interest in participating in the muriwhenua wellbeing festival.

We will review your registration and contact you with further details. If you have any questions, please reach out to [thevents@tehikuhauora.nz](mailto:thevents@tehikuhauora.nz)

Please submit the completed form by **20 September 2024**, to [thevents@tehikuhauora.nz](mailto:thevents@tehikuhauora.nz)