



ANNEX II

INDIVIDUAL REGISTRATION FORM

Please read the rules for participation carefully and consult the price table (Annex V).

The data should be filled out in capital letters.

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1. CONTACTS

Name of person in charge _____

Full address: _____

City _____ Postal Code ----- _____

Telephone _____ Mobile phone _____

E-mail: _____

Registration - Trade Name (Name)

2. MARK WITH AN X THE CATEGORY YOU ARE APPLYING

- Non-food trader
- Manufactured food merchandise
- Non-manufactured food merchandise

3. TYPE OF STRUCTURE (SPACE)

DESCRIPTIVE MEMORY

It is compulsory to fill in all fields. In case of omission, and after field inspection if regulatory non-compliance is evidenced, the Organization reserves the right to apply a surcharge of 50% on the values of participation in the event, which must be paid immediately; however, it must proceed immediately to the implementation of corrective action. Should the participant choose not to comply, he will be immediately excluded from the event.

Complete in capital letters.



Structure (insert photo)

Description: _____

Dimensions: Height: _____ Width* _____ Length* _____

(*includes cables)

Front _____ Area (sqm) _____

Esplanade/ Exhibitors (insert photo)

Description: _____

Quantities: _____

Area (m²) _____ Total Area (sqm) _____

DESCRIPTION OF THE APPLIED DECORATION (insert photo)

DESCRIPTION OF MARKETED PRODUCTS/SERVICES



DESCRIPTION OF THE CLOTHING WORN BY THE TRADER

LOGISTICS REQUIREMENTS

Need for a **water point**

Yes

No

Reason _____

Description of the **electric equipment**, with indication of each unit power Kwh and amperage.
Leiria's Castle does not have three-phase current.

Description of the **burning equipments**

Do you use **gas** bottles?

Yes

No

Answer only if affirmative

Weight _____ Hose length _____ Expiry date _____/_____/_____

Note: If you use electrical or gas equipment, an appropriate fire extinguisher and fire blanket is compulsory



Indicate with an X the type of extinguisher you will use:

ABC Chemical Powder

CO₂

Weight _____

Expiry date of extinguisher ____/____/____

Fire blanket

Yes

No

First-aid kit properly equipped

ADDITIONAL INFORMATION

No. of people at work _____

Names:

Estimated time for:

Assembly _____ Disassembly _____

Date when you intend to assemble the products ____/____/____

CURRICULUM VITAE AND HISTORY OF PARTICIPATION IN EVENTS OF SIMILAR NATURE

Signature _____



ANNEX III

PROPOSAL

Reference/Base values

- Street Food: no. of spaces to be awarded - 10**

Value basis = 40,00 euros/sqm;

- North Side Cafeteria; no. of spaces for concession - 1 Base**

value = 15,00 euros/sqm;

| | |
|---|--------------------------------|
| PROPOSAL | |
| Registration - Trade Name (Name) _____ | |
| Total Area (sqm) _____ | Proposed value per sqm _____ € |
| | |

Notes:

- The area has to include front part, terraces and promotional materials;
- VAT at the legal rate of 23% will be added to the values;
- The Organization reserves the right to invite the participation of traders on a voluntary basis;

Date: _____ de _____ de 2022.

Signature of person in charge:



ANNEX IV

INVOICING DATA

Name _____

Full address: _____

City _____ Postal Code _____ - _____

Telephone _____ Mobile Phone _____

E-mail: _____

Tax ID no. _____ CC / ID _____



ANNEX V

DECLARATION OF COMMITMENT TO OPERATE SPACE AND ACCEPTANCE OF CONDITIONS FOR PARTICIPATION

The data should be filled out in capital letters

For all due purposes it is hereby declared that:

I, _____,
representing the entity _____, established
in

hereby undertake to explore the space that shall be attributed to me in the event, LSR - LEIRIA SOBRE RODAS - 2022, to be held from 13th to 16th October 2022, respecting all the conditions set out in the terms of participation, as well as in the respective annexes and other applicable legislation, namely as regards facilities, equipment, safety and operation of the establishment / stand.

To confirm the commitment of respecting the rules, I enclose check no. _____ in the amount of €200.00, issued to the Municipality of Leiria, as a security deposit, that will be returned to me on the last day of the event, if I have fulfilled all the participation rules.

In case of my eventual withdrawal from the event, I declare that I am aware and accept the regulation implications.

Date _____ of _____ 2022.

Signature of person in charge:



ANNEX VI

CHECKLIST

Please mark X the documents you have sent

- Registration form (Annex II) duly filled in
- Invoicing data (Annex III) duly filled in
- Exhibition Photographs
- Photographs of the Products
- Photographs of Accessories
- Commercial Registry Certificate Data
- CC / ID of Managers
- Taxpayer Card Information (NIF)
- Declarations of non-debt to Social Security and the Tax Authority
- Declaration of commitment for space exploration (Annex IV) duly filled in
- I confirm the information sent
- I authorise the data to be made available for similar events

Signature _____

The application documents should be sent to the e-mail address solange@cm-leiria.pt, with reference to the name of the person in charge in the "subject" field.