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SECTION A: CONTACT DETAILS

COMPANY NAME	
COMPANY REGISTRATION NUMBER	
POSTAL ADDRESS	
1 COME NEEKESS	
PHYSICAL ADDRESS	
PROVINCE	
WEBSITE	
EMAIL ADDRESS	
TEL NO	
FAX NO	
CELL NO	
CONTACT PERSON	
ALTERNATIVE CONTACT NAME	1.
CELL NO	
SEC	TION B: EXHIBITOR STAND DETAILS
STAND HOLDER (TICK ONE)	
SPONSORED	PROJECT / COMPANY INDIVIDUAL
NAME OF PROVINCE / COUNTRY / DISTRIC	
Number of Stall required	
EXHIBITION CATEGORIES (Tick categories in v	/hich you will be exhibiting)
HOME WARE	COLLECTABLES
GARDEN & OUTDOOR	JEWELLERY & FASHION ACCESSORIES
CURIOS	NOVELTIES & GIFTS
Other	





SECTION C: ADDITIONAL INFORMATION

1. Have you exhibited at Macufe?	Yes	No				
If yes, which year(s)?						
2. Have you exhibited at any other National Exhibitions?	Yes	No				
If yes, which exhibitions and when?						
3. Have you exhibited at any other International Exhibitions?	Yes	No				
If Yes, which exhibitions and when?						
4. Will you be bringing own marketing material	Yes	No				
		1				
If yes, which ones? e.g banner / pamphlets / catalogues						

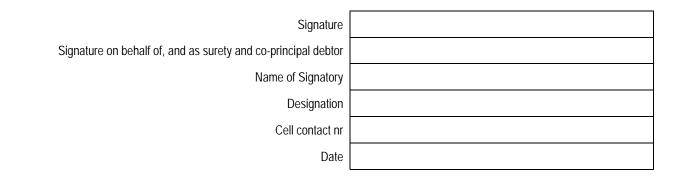
10. Describe how you exhibit your products below (the design of your stall)





14. Please supply description of your products:		

SECTION D: APPLICANTS SIGNATURE



DUE DATE FOR PAYMENTS

17 SEPTEMBER 2014

Please return this application form to:

FAX 0866674050 Tel: 051 407 2926 / 076 028 6693 / 076 847 5331 / 081 033 1088 Email: pholog@sacr.fs.gov.za / sacrnomsa@gmail.com