

APPLICATION FORM
OFM NAMPO PARK CHRISTMAS MARKET
27 - 29 NOVEMBER 2025
www.nampo.co.za

NAME OF COMPANY/EXHIBITOR:

RESPONSIBLE PERSON:

TEL:

CELL PHONE NO: WEB SITE :

E-MAIL ADDRESS 1:

E-MAIL ADDRESS 2:

VAT NO:

COMPANY REGISTRATION NO.

STREET ADDRESS:	POSTAL ADDRESS:

PRODUCTS THAT WILL BE EXHIBITED:

NAME OF PRODUCT RANGE :

- GRAIN SA has the right to decide which products may be exhibited.

EXHIBITION SPACE REQUIRED: _____m² INDOOR ☐ OUTDOOR ☐

DATE:

SIGNED