



GOLD COAST LAPIDARY CLUB

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Gold Coast Lapidary Club Inc. GEM & CRAFT SHOW

Date: Saturday 21st June 2025
Venue: Gold Coast Lapidary Club, 80 Pacific Avenue, Miami.

STALL HOLDERS CONTRACT DOCUMENT

- To secure a site a prepaid fee is charged. **3m x 3m per site \$50, 3m x 6m (2 sites) \$90, 3m x 3m limited sites available with a power lead \$80.00 per site.**
- All cheques & payments to be payable to Gold Coast Lapidary Club Inc.
Fee paid \$per EFT (being full payment / details see below).
- **Direct Deposit:**
GOLD COAST LAPIDARY CLUB – WESPAC Ashmore.
BSB 034-230 – Account: 267961
(reference: your name and keyword “Space Show 2025”)
- **Postal Address: Show Coordinator, PO Box 12 Nobby Beach Qld 4218**
- ***All stall owners must have Public Liability Insurance Cover, (PLIC) to be allowed to Trade. A photocopy must be provided with your application and proof of payment.***
- Grounds will be marked out prior to the Show and access by Traders will be at 6am on Show Day.
- Public access at 8am. No security will be provided by the GCLC.
- Only Lapidary and assorted craft items will be sold or traded from your stall

Please read and tick the appropriate boxes:

- I hereby apply for a Trader site at the 2025 Gem Show and agree to comply with the conditions as outlined by the GCLC.
- I have Public Liability Insurance Cover (PLIC) for this event (copy attached, details below).
- I am a hobbyist and will only sell material related to lapidary including stones, gems, shells, fossils, minerals, jewellery, new or used equipment, showcases and allied Items (no more than 30% commercially made goods or new craft items).
- I will only trade in the area (site(s) allocated by the organizer).
- I will safely secure my site by tying or anchoring down all shade covers. **No Stakes** are to be used.
- NOTE: Public safety must be maintained at all times.
- My stall will remain open for the full day and I will not leave my site before 4pm.**
- Should I **contravene** any part of this contract, I **agree** to vacate the Gem Show Grounds and **forfeit** all monies paid.

I HAVE READ AND ACCEPTED ABOVE CONDITIONS - BLOCK LETTERS PLEASE

Insurance Company----- Policy Number

Name-----

Address----- e-mail-----

Town/Suburb ----- Postcode----- Date-----

Signature----- Phone Contact -----