**ACTIVITY/DISPLAY BOOKING FORM**

**NEW FERRY FESTIVAL**

**NEW FERRY PARK**

**NEW FERRY**

**WIRRAL CH62 5AZ**

**SATURDAY 9th and SUNDAY 10th AUGUST 2025**

**Your name (individual/business/organistion/group):**

**What is it that you will be bringing to the festival:**

**Your address and postcode:**

**Your contact phone number(s):**

**Your email address:**

**If you are charging members of the public a fee/charge for using your equipment, we ask that you give us 20% of your takings on the last day of the event (Sunday 10th August). Please sign below to confirm your acceptance of this condition.**

***INSURANCE: You must provide us with a copy of your public liability insurance. If you do not have this, we cannot allow you to attend our event. Please enclose a copy with your application.***

*Please send this completed form* ***and copy of your public liability insurance*** *to New Ferry Community Land Trust, 63 Shorefields, New Ferry, Wirral CH62 1BS.*

**Many thanks.**