

To: Promotions Dept. (Ms Renee Yim)

Date: _____

Fax: 2618 0107

Tel: _____

From: _____ (*Mr. / Ms. / Mrs.)

Application Form For Rental of Exhibition/Promotion Venue**Particulars of Exhibitor**

Name of Organization/ Company (in English): _____

(in Chinese): _____

- Nature of Exhibitor:
- Commercial Organization
- Government Department
- Charity/ Social Service Group (please attach relevant documents)
- Non-profit making organization but of no charity nature (please attach relevant documents)
- Others (please specify): _____

Business Registration No.: _____ (Please attach BR copy)

Office Address: _____

Name of Applicant (in English): _____ Tel: _____

Position Held: _____ Fax: _____

Pager/ Mobile: _____ E-mail Address: _____

Details of Proposed Event

Official Name of Event (in English): _____

(in Chinese): _____

Exhibition Shopping Regentville Shopping Mall 帝庭軒購物商場 / _____**Mall:** Shatin Galleria 沙田商業中心 / The Waterside Shopping Mall 雅濤居 _____**Venue(s)** **1st Preference:** _____**2nd Preference:** _____**# Preferred Exhibition Date:** _____**Preferred Exhibition Time:** _____

- Nature of Event:
- Exhibition (product promotion, no sales involved)
 - Sales Exhibition
 - Variety Show
 - Carnival
 - Stage Performance: _____
(please specify: debate, seminar, fashion show, variety show, etc.)
 - Charity activity (please specify): _____
 - Others (please specify): _____

Any special activities to be held in conjunction with the above said event:

- Distribution of samples
- Distribution of printing materials
- Others (please specify): _____

Number of personnel to be deployed to control the event: _____

Name of security company covering the event (if any): _____

Details of any pre-event publicity (e.g. press release, radio, TV, leaflet, banner, advertisement)

Particulars of PR/Advertising Agency (if any)

Official Name of Agency (in English): _____

(in Chinese): _____

Address: _____

Contact Person (in English): _____ Tel: _____

Position Held: _____ Fax: _____

Pager/ Mobile: _____ E-mail Address: _____

Facilities & Equipment Required (Please tick or specify quantity required)

Item	Quantity
<input type="checkbox"/> Power supply (13Amp)	

I agree to the Terms and Conditions for use of exhibition / promotion venues

I agree to the Personal Information Collection Statement (PICS) (Please refer to Appendix VI)

The applicant _____ confirms that the information herein is true and correct and agrees to be bounded by the terms and conditions of the use of venues as laid down by the Licensor.

Signature of Applicant with
Company Chop

Date

This form should be sent or faxed to the following office **at least 1 month** prior to the proposed event commencement date.

Address: Leasing Marketing & Promotions Department (Attn: Ms. Renee Yim)
Sino Estates Management Limited
Customer Service Centre
Shop 1129C, 1/F, Tuen Mun Town Plaza Phase 1,
Tuen Mun N.T.
Tel: 3165 6616
Fax: 2618 0107

Management Approval (For Office Use Only)	
Licence Fee:	
Electricity Fee:	
Other Charges:	
Total Amount:	
Confirmed & Accepted by:	
Signature:	Date:

Note:

1. The Licensor has absolute discretion to accept or refuse any application.
2. Licensee shall promote the specified business in the specified format as approved by the Licensor. Or Licensor shall cease operation of exhibition without notice and no licence fee shall be refunded.
3. Licensee shall read the **"House Rules"** thoroughly and please call us at 2450 7782 for details. The Licensor reserves the right to alter or cancel any approved applications should the Licensee fail to comply with the rules.

信和集團旗下商場供短期展銷 Sino Malls for casual leasing:

	電話 Tel.		電話 Tel.
屯門市廣場 (tmtplaza)	2450 7782	藍灣廣場(Island Resort Mall)	2199 2036
奧海城 (Olympian City)	2397 3636	沙田商業中心 (Shatin Galleria)	3165 6616
荃新天地及荃新天地 2 (Citywalk & Citywalk 2)	3926 5700	帝庭軒購物商場 (Regentville Shopping Mall)	3165 6616
中港城(China Hong Kong City)	2139 6087	雅濤居購物商場 (The Waterside Shopping Mall)	3165 6616
黃金海岸商場 (Gold Coast Piazza)	2452 6566		

To: **Leasing Marketing & Promotions Department**

Date: _____

Fax: 2618 0107

From: _____ (*Mr. / Ms. / Mrs.)

Exhibition Information Form

For better co-ordination with your exhibition, please fax the completed form to Leasing Marketing & Promotions Department **one week prior** to the first exhibition day.

Exhibition Date: _____

Exhibition Time: _____

Name of Event: _____

Exhibition Venue: _____

Move-in Time: _____

Move-out Time: _____

Company Name: _____

Contact Person: _____ Title: _____

Tel: (during office hours) _____

(after office hours) _____

Fax: _____

Email address: _____

Signature:
(with company chop) _____