

To: **Promotions Dept.**  
 (Ms Winnie Kong / Ms Becky Chan)

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 document)
- Non-profit making organization but of no charity nature (please attach relevant document)
- Others (please specify) \_\_\_\_\_

Business Registration No.: \_\_\_\_\_  
 \*Please attached the BR Copy as well (請附上商業登記証附本)

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 雅濤居  
 Kwun Tong Plaza 觀塘廣場

\* Please delete as appropriate Other: \_\_\_\_\_

Exhibition Venue(s) 1<sup>st</sup> Preference: \_\_\_\_\_  
 2<sup>nd</sup> 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): \_\_\_\_\_

Products/ Theme to be promoted or displayed: \_\_\_\_\_

Power Supply Required:  Yes, Quantity: \_\_\_\_\_  No

Carpet setup by licensor:  Yes  No (Please refer to rate card for setup cost)

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 (eg. press release, radio, TV, leaflet, banner, advertisement)  
 \_\_\_\_\_

**Particulars of PR/Advertising Agency (if any)**

Official of Agency

(in English): \_\_\_\_\_ (in Chinese) \_\_\_\_\_

Address: \_\_\_\_\_

Contact Person (in English): \_\_\_\_\_ Tel: \_\_\_\_\_

Position Held: \_\_\_\_\_ Fax: \_\_\_\_\_

Pager/ Mobile: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

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

**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)	3165 6616
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	3926 5700	帝庭軒購物商場	3165 6616
(Citywalk & Citywalk 2)		(Regentville Shopping Mall)	
中港城(China Hong Kong City)	2139 6087	觀塘廣場 (Kwun Tong Plaza)	3165 6616
黃金海岸商場	2452 6566	雅濤居購物商場	3165 6616
(Gold Coast Piazza)		(The Waterside Shopping Mall)	

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

Address: Ms. Winnie Kong / Ms Becky Chan  
Retail Marketing & Promotions Department  
**Sino Estates Management Limited**  
Customer Service Centre  
Shop 1129C, 1/F  
Phase 1,  
Tuen Mun Town Plaza  
Tuen Mun N.T.  
Tel: 3165 6608 / 3165 6616  
Fax: 2618 0107

<b><u>Management Approval (For Office Use Only)</u></b>	
Licence Fee:	
Electricity Fee:	
Other Charges:	
<b>Total Amount:</b>	
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 pls call us at 3165 6617 for details. Email: joanneleung@sino-estates.com The Licensor reserves the right to alter or cancel any approved applications should the Licensee fail to comply with the rules.

**To: Promotions Dept.**  
**(Ms Winnie Kong / Ms Becky Chan)**

Date:

Fax: 2618 0107

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

**Exhibition Information Form**

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

Exhibition Shopping Mall:			
Exhibition Date:			
Exhibition Time:			
Exhibition Title:			
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)			

**\* Attached the rundown / floor plan**