BESCOT PROMOTIONS REGISTRATION FORM

REGISTRA	TION FO	RM					
Full Name:							
Title:	MR	MRS	MISS	MS		C	OTHER
Trading Name:							
Business Address:							
Post Code:							
Contact Number:							
Vehicle Registration: Details of the goods sold:	s to be						
Email Address:							
PUBLIC LIA	ABILITY	INSURAN	ICE DE	TAILS			
Company Name:							
Policy Number:			Ex	крігу Date:			
ALL traders must have	e their own PLE	3 insurance in o	rder to trade	with Bescot Pro	omotions.		
By signing this form	you are agree	ing to adhere t	the Besco	t Promotions r	ules and regu	ulations.	
Signiture:				Date:			
Data Protection Act 20	018: Bascot Pri	omotions will be	old the inform	nation you prov	ide on a secur	o password	protected com

INFO@BESCOTPROMOTIONS.CO.UK 07875655875/07792676746

and it may be used to inform you of forthcoming events and markets or in the event of an emergency.