

2019 Milford Farmers' Market
 Thursdays May 7 – October 8 2020
 3pm – 7pm

VENDOR APPLICATION

Business Name: _____

Vendor/Contact Name: _____

Address: _____ **City, State, Zip:** _____

Email Address & Website: _____

Daytime Phone: _____ **Evening Phone:** _____

Please list the names (first and last) of any others who will be actively participating in the market:

EMERGENCY CONTACT: _____ **EMERGENCY PHONE#:** _____

Please include copies of all **required permits/certifications and Commercial Liability Insurance** for YOUR business, as defined on the vendor information sheet.

Please circle the description that best describes your products:

- Produce Meat Dairy Eggs (Organic/Non-organic)
- Baked Goods Nursery/Plants Cut Flowers Medicinal Herbs/Dry Herbs
- Personal Care Artisan Value-Added Foods

Brief Business Description: _____

On the back of this application, please fill out the form indicating what products you have available to sell, or would like to sell at the market. Please **CIRCLE** all items that are certified organic or local organic. By circling those items, you certify that they are certified or local organic as defined in state regulations.

Please **CIRCLE** all the dates you plan on attending:

7 MAY	11 JUNE	16 JULY	20 AUG	24 SEPT
14 MAY	18 JUNE	23 JULY	27 AUG	8 OCT
21 MAY	25 JUNE	30 JULY	3 SEPT	X
28 MAY	2 JULY	6 AUG*	10 SEPT	X
4 JUNE	9 JULY	13 AUG	17 SEPT	X

Prepayment of all fees is required. (If you are not selected for participation your check will be returned to you.)

*** DUE TO MILFORD MEMORIES THERE WILL NOT BE A MARKET ON *AUGUST 6, 2020***

PAYMENT OPTIONS:

- **Booth fee** is \$20.00 per week for one space.
- **Reservation Agreement**, (Vendors that attend 11 or more weeks, but want to pay week to week) for a flat fee of \$17.00 per week for one space.
- **Pre-payment option**, 6-10 weeks for a fee of \$16.00 per week for one space.
- **Pre-payment option**, 11-20 weeks for a fee of \$14.00 per week for one space.

The undersigned acknowledges that you have read and fully understands the Milford Farmers' Market payment information. I hereby agree to comply with the Milford Farmers' Market rules and regulations and all other Federal, State and Local rules and regulations that apply. I understand fully that I will forfeit my right to sell at the Milford Farmers' Market if I am found in non-compliance.

Signature: _____ **Date** _____

Thank you! See you at the Market!

FOR OFFICE USE ONLY	
Date Received:	_____
Approved or Disapproved	_____
Stall #:	_____
Payment Received:	_____