

2021 Milford Farmers' Market
 Thursdays May 6 – October 14, 2021
 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:

6 MAY	10 JUNE	15 JULY	19 AUG	23 SEPT
13 MAY	17 JUNE	22 JULY	26 AUG	30 SEPT
20 MAY	24 JUNE	29 JULY	2 SEPT	7 OCT
27 MAY	1 JULY	5 AUG	9 SEPT	14 OCT
3 JUNE	8 JULY	12 AUG	16 SEPT	

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 12, 2021***

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 \$18.00 per week for one space.
- **Pre-payment option**, 11 weeks or less season **\$161 must be paid on the first day you arrived at market (per space)**
- **Pre-payment option**, Season 23 weeks, **\$322 must be paid on the first day you arrived at market (per 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!

MFM Vendor Application
 Be Safe, Social Distance, Mask Up and Mask Right.

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