

UNION FARMERS' MARKET VENDOR APPLICATION

MARKET YEAR _____

PLEASE CHECK ONE: _____ Returning Vendor _____ New Vendor _____ Guest Vendor

Your non-refundable application fee must be submitted with this completed application along with copies of your valid, relevant state and/or federal licenses and proof of current liability insurance, and signed copy of Market Vendor Rules.

Business name: _____

Primary contact: _____

Business owner if different: _____

Business phone: _____

Business email: _____

Cell phone: _____

Facebook: _____

Website: _____

Other: _____

Postal mail address: _____

Emergency contact: _____

A canopy or umbrella is required and must be able to be safely secured at all times during the Market.

Which cover do you use? _____ What size is it? _____

Please list all products you, yourself, have grown or produced and intend to sell at the Market.

Please list all products you intend to bring in that are not made by you. (See Rule #3)

Please use Page 2 (over) to tell us about yourself and your business. We need information, photos, descriptions, etc., in order to publicize you and the Market!

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.