

2017 Linton Farmers' Market Fall Holiday Market Application

Please fill out completely and return to:

Linton City Hall 86 South Main Street Linton, IN 47441	OR	Mark Stacy 164 S 1500 W Linton, IN 47441
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All rules and regulations contained within the 2017 Linton Farmers' Market Vendor Handbook also apply to the Fall Holiday Markets. All Vendors must read the Vendor Handbook prior to completing and submitting this form. The 2017 Vendor Handbook can be found at www.lintonfarmersmarket.com.

VENDOR INFORMATION

Name of farm or business _____

Name of Primary Vendor _____

Name of Stand Assistant _____

Mailing address _____

City _____ Zip _____

Home Phone _____

Cell Phone _____ Text? Yes

Email _____

PRODUCT INFORMATION

List primary products you expect to sell at the 2017 Fall Holiday Market

Please Note: Participation in the Fall Holiday Market is open to all farmers and producers in Greene and surrounding counties, who sign and submit an application, pay applicable fees, abide by Market Regulations and produce **100%** of all food and non-food products offered for sale. No retail, commercial, imported or second-hand item shall be offered for sale at the Market, however, crafts made with "upcycled" materials will be accepted. All crafts **must be approved** by the Market Manager prior to being offered for sale. Vendor space may be limited and regular season vendors will be given preference.

MARKET REGULATIONS AND CONTRACT

_____ I certify that I have read, understand and agree to abide by all provisions set forth in the
Initials Market Regulations and Market Contract.

MARKET BUCKS VENDOR AGREEMENT ADDENDUM (if applicable)

_____ I certify that I have read, understand and agree to abide by all provisions set forth in the
Initials Market Bucks Vendor Agreement Addendum.

HOME BASED VENDOR FOODS ADDENDUM (if applicable)

_____ I certify that I have read, understand and agree to abide by all provisions set forth in the
Initials Home Based Vendor Foods Addendum.

VALUE ADDED FOODS ADDENDUM (if applicable)

_____ I certify that I have read, understand and agree to abide by all provisions set forth in the
Initials Value Added Foods Addendum.

VENDOR FEES

- Oct. 28th Market (paid prior to Oct. 26th) - \$10.00
- Oct. 28th Market (paid Oct. 26th or Oct. 27th) - \$20.00
- Nov. 18th Market (paid prior to Nov. 16th) - \$10.00
- Nov. 18th Market (paid Nov. 16th or Nov. 17th) - \$20.00

No applications will be accepted on October 28th or November 18th.

Please make checks payable to **Linton Farmers' Market**.

Payment must be included with application.

This Agreement is not effective until approved by the Market Manager.

Primary Vendor's Signature

Date

Market Manager's Signature

Date

For Office Purposes Only

Cash Check No. _____ Amount: \$ _____ Approved