

Montgomery Farmers' Market New or Returning Vendor Application

Date of application: _____ Season (year) applying for: _____

Vendor Type: Full-Time Part-Time (# of weeks requesting: _____)

Business Name: _____

Contact Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Physical Address: _____

(if different)

City: _____ State: _____ Zip: _____

Telephone: _____ Email: _____

Website: _____

Fees: \$275 (Full-Time) or \$20 per week (Part-Time)

For all Full-Time Vendors, a \$25 Late Fee will be charged for applications postmarked after March 1st (please include this fee with your application if needed). Fees are for the rental of a 10ft x 10ft space on each market day. Vendors are responsible for providing and setting up their own shelter, table, signs, displays etc. Market is rain or shine; lightning after 8:45am cancels. Setup must be completed, and any extra vehicles moved out of the area, by 8:50am.

Returning vendors:

Vendor fee included with application: Check # _____ Amt: \$ _____

Note: If you do not include your fee with this application, you will be expected to pay your vendor fee and any applicable late fees as soon as possible and no later than your first market day. Vendors with unpaid fees WILL NOT be allowed to attend the Market until outstanding fees have been paid.

New vendors:

Fees shall be due and payable after review and approval of your application by the MFM Board. At which point fees must be paid as soon as possible and no later than your first Market day. Vendors with unpaid fees WILL NOT be allowed to attend the Market until outstanding fees have been paid.

Do you require electricity?

Yes

No

[If yes, then vendors must provide their own heavy duty, outdoor rated, extra-long, 12-gauge extension cord with ground (three prong).]

For Full-Time Vendors: Please list below any dates you do **NOT** plan to attend the Market:

For Part-Time Vendors: Please list below your available market days and indicate your preferred dates:

For Returning Vendors: What year did you begin selling at the Montgomery Farmers Market?

At which other farmers' markets or locations do you sell your products?

Type of Products: **Please list or describe all products you would like to sell. For value-added, home-produced products, attach a sample of your label for each product.** Attach an additional sheet if necessary. Products not listed may not be sold. Montgomery Farmers' Market reserves the right to limit the number of vendors selling similar items of produce or other products to avoid over-representation.

Are there any items you wish to sell at the Market this season that you have not sold at our market in the past? Please list them below:

Production Practices: The Montgomery Farmers' Market is committed to fresh, clean, healthy and local food and craft products. For our information, please tell us about your growing practices and pest control management, ingredients used in your artisan food products, production of your craft products, and sourcing of ingredients/supplies not grown/produced by you. An effort to use local ingredients and items in artisan food products and crafts is expected and use of organic ingredients is preferred. Your explanation may be posted on our website and made available to our patrons.

SNAP & Produce Perks Program

I understand that if I sell SNAP or Produce Perks eligible items, I will be required to participate in the market's SNAP & Produce Perks Program. (For more information on what is considered a SNAP eligible item, please visit <http://www.fns.usda.gov/snap/eligible-food-items>, for more information on Produce Perks, please visit <http://www.produceperks.org>) **Please circle correct statement:**

- I sell SNAP eligible items and I agree to participate in the market's SNAP and Produce Perks program.
- I do NOT sell SNAP eligible items.

Name of Business: _____

Signed: _____ Date: _____

Farmers Buck Program

I understand that as a Market vendor, I am required to participate in the Market's Farmers Buck Program. I agree to accept MFM Farmers Bucks at my booth and understand that I will be reimbursed at the end of the market day for any Farmers Bucks redeemed at my booth.

Name of Business: _____

Signed: _____ Date: _____

You are responsible for any required licenses from the County and the State and shall provide them upon request.

General Information

The Market Board meets monthly and applications will be reviewed at those meetings and prospective vendors will be notified once a decision regarding their application has been made. Preference is given to returning vendors in good standing with the Market and to Full-Time Vendor applications.

The Board reserves the right to reject an applicant for any reason, to limit the number of Part-Time vendors at the Market, and to limit the types and number of products sold at the Market.

Inspections

You agree to permit Market representatives to conduct physical inspections of the locations where your products are grown or otherwise produced, whether it be your home, farm or other facility, in accordance with the Guidelines (referenced below).

Liability Information

Montgomery Farmers' Market shall not be responsible for any loss, damage, or injury to any property of any Vendor or any loss, damage or injury to Vendor booths or employees of Vendors, or friends or family, from any cause whatsoever.

Business owners and employees hereby agree to indemnify, save and hold harmless the Montgomery Farmers' Market, members of its Board, employees or volunteers from and against any and all costs, expenses (including but not limited to legal fees and costs), losses, fees, liabilities, damages, lawsuits and/or deficiencies, whether threatened or actual, resulting from or arising out of any and all actions, omissions, or activities of the Market, members of its Board, employees, agents, invitees, licensees, or assigns of the Market or its Vendors.

The Montgomery Farmers' Market shall not be liable for any cost, expenses, loss or damage arising out of, or related to, personal injury; loss of, or damage to, or distribution of property of a Vendor; or failure to provide space for an exhibit, removal of same, or to hold event as scheduled.

Guidelines

I have read and agree to the Montgomery Farmers' Market Guidelines (located at www.montgomeryfarmersmarket.org).

Name of Business: _____

Signed: _____ Date: _____

This completed application should include:

_____ This form, completely filled out & signed with any additional information attached

_____ Proof of Insurance showing Montgomery Farmers' Market as "additional insured"

_____ Your Vendor Fee check (\$275 for FT Vendors or \$20 per week for PT Vendors: # weeks requested _____ x \$20 per week = \$ _____)

Thank you!

Please mail this completed application to:

**Montgomery Farmers' Market
c/o Adrienne Davidson
9484 Longren Court
Cincinnati, OH 45242**

*For questions or additional information please contact:
Adrienne Davidson at montfarmersmkt@gmail.com or 513-706-6070*