

Returning Vendors 2020 Summer Market Application - The Farmers' Market of Keene

Vendor Application and Membership Fee due by March 14, 2020

Vendor Business Name:

Contact person:

Email address:

Telephone:

Mailing address:

Products you are offering/What do you plan to sell?

Attach required Licenses i.e. Prepared Food/Food Service License, Milk License, Certificate of Kitchen Approval from the appropriate Depts of Health, etc.

When will you be coming? Tuesday _____ Saturday _____

Will you be coming for the full season (May through October?) If not, when do you expect to start and stop coming? Please estimate as closely as possible.

Each vendor space is approximately 1.5 parking spaces. How many vendor spaces will you need? _____

Membership Fee \$75 per year (Please note: fee covers general overhead and costs for summer market. Winter market costs are borne by members who wish to sell there.)

Payment Option #1: Pre-paid full summer season site fee per market space (15% off daily rates)

_____ Space(s) times 28 full season Saturday site fee \$280 - 15% = \$238

_____ Space(s) times 28 full season Tuesday site fee \$140 - 15% = \$119

_____ Space(s) times full season ALL (Tues and Sat) site fees \$420 - 15% = 357

Due with Application: Total Pre-Paid Site Fees + \$75 membership fee = \$ _____

Payment Option #2: \$75 membership fee and Daily Site Fee paid at each market attended

_____ \$10 per Saturday, \$5 per Tuesday, collected at each market throughout season

Due with Application: Membership Fee (\$75) \$ _____

As a vendor at The Keene Farmers' Market, I/we:

- 1) Understand and will comply with the Market's **100% grower-only policy**.
- 2) Agree that prior to offering any products for sale, I will become familiar and comply with all applicable rules and regulations as described in the Market Guidelines.
- 3) Understand that individual product liability is my responsibility and thus release The Farmers' Market of Keene, the Market Coordinators, and the City of Keene from liability due to my product(s).

By signing your name you also agree to treat all vendors and customers with respect and courtesy at all times.

Signature: _____

Printed Name _____

Date: _____

Please send this completed application to:

Farmers' Market of Keene
PO Box 425
Keene, NH 03431

or email to keenefarmersmarket@gmail.com