

STEPHENS COUNTY MARKET

2018 VENDOR APPLICATION

All information must be legible and complete

Applicant Name: _____

Farm or Business Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Telephone: _____ Cell: _____

E-mail: _____

The following products will be sold at your booth: (Check all that apply)

Fresh Produce (List **All**): _____

Jams/Jellies

Baked Goods (Describe): _____

Honey

Plants (Describe): _____

Handmade Items (Describe): _____

Prepared Foods (Describe): _____

Other (Describe): _____

Address to the production site: _____

Vendors are required to comply with all local, state and federal regulations/licensing requirements. A copy of applicable license(s) must be turned in to the Stephens County Market prior to the first day/event of the season. For crafts, please include a photograph or a sample with the application.

I hereby allow the Stephens County Market Committee to include my name and picture in articles, on the county website and all social media advertising pages. I also understand that Stephens County and/or the Market Committee will not assume responsibility for any loss/injury encountered while participating at the Stephens County Market.

I have read, understand and agree to comply with the Market Policies & Operating Rules of the Stephens County Market. I am over the age of 18 years old, and I am the Vendor/Applicant responsible for participation in the Stephens County Market. I understand that representatives/committee members from the Stephens County Market have the right to visit and inspect any farmer or crafter at their site of production to ensure that the vendor is adhering to all market policies. If the volume of the produce being sold does not match the volume being produced, the vendor will not be allowed to sell the product. I further attest that the information provided regarding the products is accurate, true and correct.

Signature of Participant

Printed Name of Participant

Date

FOR OFFICE USE ONLY

Amount \$ _____ Cash _____ Check _____ Ck# _____ Received By _____ Date _____

