

**BRADFORD FARMERS' MARKET  
VENDOR APPLICATION FORM 2018**

Must be submitted prior to 1 March 2018. Please complete and forward with payment to:

**Bradford Farmers' Market Vendors Group @  
[BradfordOntarioFarmersMarket@gmail.com](mailto:BradfordOntarioFarmersMarket@gmail.com)**

**E transfers will be accepted.**

**A copy of this form will be returned to you as your Seasonal Vendor's Permit for 2018 if approved. A \$30.00 fee is charged for N.S.F. Cheques, your application will be held until appropriate fees are paid.**

Business Name: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Website: \_\_\_\_\_

Vendor Class: (please circle the category that best describes your business)

**Grower/Producer**

**Baker/Food Vendor**

**Artisan/Crafter**

Please indicate ALL the products you will be bringing for the 2018 season (This will be used in online promotions - 30 words or less, use the back of this sheet if necessary).

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Renewal - Number of years as a full time vendor: \_\_\_\_\_  New vendor

Size of booth requested: \_\_\_\_\_

Seasonal (full season)

Occasional - Requested dates: \_\_\_\_\_

Weather Sensitive (meaning you won't come if it raining - this will affect your location in the market)

For information on Vendor Eligibility, Booth Fees and Standards, Vendor Obligations and all other rules and regulations, please read the Rules and Regulations Document.

- I agree that the information provided above is true and accurate;
- I shall indemnify and hold-harmless, the Bradford Farmers' Market Vendors Group, the Bradford Farmers' Market Vendors Group Board of Directors, the Market Manager, the Bradford Farmers' Market and the town of Bradford West Gwillimbury from all claims, demands, losses, damages and actions that may arise.
- Vendors agree to accept full responsibility for any loss, damage or accident occurring at the Market as a result of negligence or wilful default on the part of the Vendor. The BFMVG shall carry Public Liability Insurance on the Market area to protect the Market and participants, and to protect the Board of Directors and BFMVG for their actions on behalf of the Market. Vendors should also contact their Insurance Agent relative to their participation in the Market
- **I have read and agree to comply with the Rules and Regulations of the Bradford Farmers' Market and understand that failure to do so may result in revocation or suspension of membership.**

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

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To be completed by the BFMVG Board of Directors

Date of approval: \_\_\_\_\_