

BRADFORD FARMERS' MARKET
VENDOR APPLICATION FORM 2019 – page 1

Please complete and forward to bradfordontariofarmersmarket@gmail.com. Payment will secure your spot once you have been approved.

Business name: _____

Owner's name: _____

Address: _____

Telephone: _____

E-mail: _____

Website: _____

For membership fees for the 2019 season, please see the Rules and Regulations Document.

Please make cheque payable to: **Bradford Farmers' Market Vendors Group** or send an email transfer to bradfordontariofarmersmarket@gmail.com. A copy of this form will be returned to you as your Seasonal Vendor's Permit for 2019 if approved. A \$30.00 fee is charged for N.S.F. cheques; your application will be held until appropriate fees are paid.

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

Grower/Producer

Baker/Food Vendor

Artisan/Crafter

Please indicate the products you will be bringing for the 2019 season (This will be used in online promotions – 30 words or less, use the back of this sheet if necessary).

Bakers/food vendors & crafters/artisans, indicate your overall product category. This is our attempt to keep our market diverse with a wide variety of products. _____

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VENDOR APPLICATION FORM 2019 – page 2

Renewal - Number of years as a full time vendor _____

New vendor

Size of booth requested: _____

Seasonal Vendor (full season)

Occasional Vendor, Requested Dates: _____

(Occasional Vendors are subject to approval by the Board of Directors)

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

- 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 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 Bradford Farmers' Market Board of Directors

Date of approval: _____ Stall(s) allocated: _____