

LEBANON FARMERS' MARKET VENDOR APPLICATION

NAME \_\_\_\_\_

FARM OR BUSINESS NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TELEPHONE \_\_\_\_\_ CELL \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

I PLAN ON VENDING THE FOLLOWING PRODUCTS \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ANTICIPATED SET-UP DAYS AND DATES (CHECK ALL THAT APPLY)

WEDNESDAYS \_\_\_\_\_ SATURDAYS \_\_\_\_\_

APRIL \_\_\_\_\_ MAY \_\_\_\_\_ JUNE \_\_\_\_\_ JULY \_\_\_\_\_ AUG \_\_\_\_\_ SEPT \_\_\_\_\_ OCT \_\_\_\_\_

ACCESS TO ELECTRICITY REQUESTED (CIRCLE ONE) YES NO

PURPOSE FOR WHICH ELECTRICITY WILL BE USED \_\_\_\_\_

I have read the rules and regulations of the Lebanon Farmers' Market, and agree to abide by those rules and regulations. I agree to consent to a farm visit, or visits, in a timely manner, to verify compliance with rules 3 and 4. I also attest that I will comply with all state and local laws as they pertain to sales at a farmers' market. I understand that failure to do so can lead to my expulsion from the market. I understand that I am required to carry a commercial liability insurance policy which names Lebanon Farmers' Market as also insured, and must provide the market manager with a Certificate of Commercial Liability Insurance.

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