



Vendor Application for the Grangeville Farmers' Market

Local Produce, Crafts, Food, and Music
Saturday Mornings At Heritage Square
Reopening June 7th 2008, Rain or Shine

Contact Info

Your Name: _____
Business Name: _____
Address: _____
City, & Zip Code: _____
Email: _____
Home phone: _____
Cell phone: _____

Dates (all 8am-Noon)

The entire 17 day season
(or pick your dates below)

June	July	Aug	Sept	Oct
<input type="checkbox"/> 6/7	<input type="checkbox"/> 7/12	<input type="checkbox"/> 8/2	<input type="checkbox"/> 9/6	<input type="checkbox"/> 10/4
<input type="checkbox"/> 6/14	<input type="checkbox"/> 7/19	<input type="checkbox"/> 8/9	<input type="checkbox"/> 9/13	
<input type="checkbox"/> 6/21	<input type="checkbox"/> 7/26	<input type="checkbox"/> 8/16	<input type="checkbox"/> 9/20	
<input type="checkbox"/> 6/28		<input type="checkbox"/> 8/23	<input type="checkbox"/> 9/27	
		<input type="checkbox"/> 8/30		

Signature

Tax Forms (ST-124) are available the day of market and must be completed prior to any sales. Vendors are required to sign the tax form, and are responsible for paying all taxes as required by applicable city, state, and federal laws. A Grangeville business license is not necessary.

I have read the Grangeville Farmers' Market 2008 Policies and Procedures Handbook and agree to comply with the rules contained therein. I agree to assume full responsibility for any risks, injuries, or damages known or unknown, which I might incur as a result of participating in the Grangeville Farmers' Market. In further consideration, being permitted to participate in the Grangeville Farmers' Market, I knowingly, voluntarily and expressly waive any claim I may have against the Grangeville Farmers' Market for any injury or death caused by negligence or other acts. I have read the above release and waiver of liability and fully understand its contents. I voluntarily agree to the terms and conditions stated above.

Signed: _____ Date: _____
Print Name: _____

Call Suzanne at (208) 315-1924 or Renée at (208) 839-2395
with questions about vendor rules and your application.
www.GrangevilleFarmersMarket.org

Products

Check all the categories that describe your products for sale:

- Farm products ie: Eggs, Meat
- Baked goods
- Produce
- Crafts
- Flowers/Plants
- Specialty Foods
- Activities
- Other: Please List

Please Describe Your Products:

Number of Spaces

- Single 10' by 10' Space (or)
- Double Space (or)
- Triple Space

Electricity Needed

Payment

- 10% of your sales
- \$10 per space per Saturday
- \$36 per space for 4 weeks in a row
- \$128 per space for entire season

Multiply the number of spaces with the payment to calculate the amount due.

Please make checks payable to:
GRANGEVILLE'S FARMERS' MARKET.

Mail application and check to:

Grangeville Farmers' Market
108 North State Street #4,
Grangeville, Idaho 83530

Market Use Only:

Dated: _____ ST-124: Yes or No
Paid: _____ Check #: _____