

COXSACKIE FARMERS MARKET

VENDER APPLICATION 2021

Date: _____ Business Name: _____

Owner/Operator Name: _____

Business Phone: _____ Cell Phone (if different): _____

Email: _____ Web site: _____

Employee Names: _____

Emergency Contact: _____

Mailing Address: _____

Business Address (if different from above): _____

Listed below are the dates for the 2021 Market season. Please cross out any dates you will not attend. Preference will be given to full season attendance. There is a \$10 per (10'x10') space per week. A full season is \$200. Payment will be due upon acceptance into the market for the 2021 season.

May 19	June 23	July 28	Sept 1
May 26	June 30	Aug 4	Sept 8
June 2	July 7	Aug 11	Sept 15
June 9	July 14	Aug 18	Sept 22
June 16	July 21	Aug 25	Sept 29

Do you require access to electricity? Yes _____ No _____

Do you have any additional site specific requirements and/or requests? _____

Growers only:

Do you participate in the Farmers Market Nutrition Program? Yes _____ No _____

**please reach out coxsackiefarmersmarket@gmail.com if you have any questions about or how to join FMNP*

Send completed forms to: Village of Coxsackie Farmers Market % Village Clerk, 119 Mansion Street Coxsackie, NY 12051

COXSACKIE FARMERS MARKET

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Vendor Description: _____

For product eligibility please see the market rules and regulations. Please list all products under each category. You may continue on the back, attach or email coxsackiefarmersmarket@gmail.com a detailed list of products if needed. Please note we are a producers market and do not permit resale of purchased products.

<u>Vegetables/Fruits:</u>	<u>Grocery:</u> Ex. granola, vinegar, jam <u>Baked Goods:</u>	<u>Animal Products:</u> <u>Plants:</u>	<u>Prepared Ready to Eat:</u> <u>Other:</u>
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COXSACKIE FARMERS MARKET

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I, _____, hereby apply to the Village of Coxsackie ("the Sponsor") for Annual membership in the *Coxsackie Farmers Market* for the 2021 season.

As a member of the *Coxsackie Farmers Market*, I agree that prior to offering my products for sale at the *Coxsackie Farmers Market*, that I am/will become familiar with the *Markets'* Rules and Regulations and agree to comply with said Rules and Regulations.

As a Member of the *Coxsackie Farmers Market*, I agree to pay the Sponsor the daily marketing fee (\$10 for each 10'x10' space) in advance for the season, as is required by the Sponsor.

Signed _____ Dated _____

Business Name _____

Coxsackie Farmers Market Hold Harmless Agreement
Village of Coxsackie
119 Mansion St, Coxsackie NY 12051

Agreement between _____ and the *Village of Coxsackie* for the *Coxsackie Farmers Market*.

I, _____. Shall indemnify and agree to hold harmless the *Village of Coxsackie* and the *Coxsackie Farmers Market* from and against all liability, damage, expense, cause of action, suits, claims, penalties and or judgements arising from injury to person sustained by anyone as a result of consuming any food or drink acquired from me, use of any item purchased from me or from any negligent action on my part.

Signed _____ Dated _____

Address _____

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