

LANCASTER FARMERS MARKET APPLICATION 2019

Due March 31st, 2019

BUSINESS NAME

VENDOR NAME

MAILING ADDRESS

MAIN PHONE NUMBER

CELL NUMBER (FOR MARKET DAY USE - OPTIONAL)

EMAIL

WEBSITE

SOCIAL MEDIA

BEST MEANS TO CONTACT YOU FOR URGENT ISSUES

(e.g. market cancellation in case of dangerous weather. Please provide phone # or email address)

EMERGENCY CONTACT (i.e if something happens to you. Please provide name and phone #)

PRODUCTION ADDRESS

If your product is grown or produced somewhere other than your own address above, please provide the following information.

LOCATION NAME

ADDRESS

OWNER/MANAGER NAME

OWNER/MANAGER PHONE

OWNER/MANAGER EMAIL

ABOUT YOUR BUSINESS

If a returning vendor, how many years have you been a Lancaster Farmers Market vendor?

Please indicate which permits, licenses & certifications are required for your products:

Vendor's License

Organic Certification or Certified Naturally Grown

Mobile Food Service Operation or Retail Food Establishment

Temporary Food Service Operation or Retail Food Establishment

ODA License/s:

Other:

How many miles do you travel from your farm/business to the Lancaster Farmers Market?

(Farmers) How many acres is your farm operation?

Does your business accept the following forms of payment at market?

Credit Cards

SNAP/EBT

Senior FMNP vouchers

WIC FMNP vouchers

NOTES

Anything else we should know? Please feel free to provide information here about your growing practices, or details about the local sourcing of ingredients for value added or prepared foods.

2019 SCHEDULE

Saturdays, May 4 - October 5, 2018

___ I plan to attend the entire season (23 market days)

___ I plan to attend the following weeks (select below) for a total of weeks

___ May 4 ___ June 1 ___ July 6 ___ August 3 ___ September 7 ___ Oct. 5

___ May 11 ___ June 8 ___ July 13 ___ August 10 ___ September 14

___ May 18 ___ June 15 ___ July 20 ___ August 17 ___ September 21

___ May 25 ___ June 22 ___ July 27 ___ August 24 ___ September 28

___ June 29 ___ August 31

These dates are not binding, but please do confirm any date changes with market management at least one week prior to planned attendance.

Type of vehicle used at market:

If your vehicle is larger than a pickup truck, what is its total length, including trailer?

Any other needs or requests regarding placement in the market? _____

Who will staff your booth, if other than the owner? _____

Artisan Vendors: Please include at least three representative photographs of your work. You may submit hard copy photos, digital photos via email, or provide a website here.

Please initial and sign below:

I have read, understand and agree to abide by these rules & regulations.

I will attend all the markets I have agreed upon or notify market management 1 week in advance.

I have all the necessary permits and licenses required to sell my products at the farmers market.

I have proof of insurance for \$1,000,000 general liability insurance naming Lancaster Fresh Market, Inc. as an additional insured.

I grant permission to Lancaster Fresh Market to use pictures, audio and/or video of myself, booth and products for the purposes of advertising the market. This may include, but is not limited to the website, Facebook, Instagram and print or online advertising.

SIGNATURE

DATE

Please return completed application by March 31st to the mailing address below or email to farmersmarket@kellermarkethouse.com.

OFFICE USE ONLY:

_____ Received _____ Notified _____ Amt

_____ Payment _____ Insurance _____ Licenses

_____ Receipt _____ Con Con