



**Three Rivers
Farmers' Market**

**2014 Three Rivers Farmers' Market
Vendor Application Form**

Dates: June 19 through October 30

**Market Hours: Sundays 9AM – 1PM and Thursdays 3 – 7PM
JD's Business Complex, 38 Elm Street, Milo, Maine 04463**

I wish to become a member of Three Rivers Farmers' Market.

Name of Applicant: _____

Business Name (if applicable): _____

Contact name(s): _____

Phone Number: _____ E-Mail _____ URL _____

List the specific produce or products you wish to sell (use back of sheet if necessary):

Artisans and craftspeople must submit a photograph or sample of your product with this application for consideration for membership.

Vendors of potentially hazardous/perishable foods (meat, cheese, tofu, fish) must also provide a certificate/license from the Board of Health with this application.

I understand that the 2014 membership dues of \$ 25.00 is due with this application and will be refunded only in the event that my membership is denied. I also understand that an additional fee of \$3.00 per day will be paid each day I participate in the Three Rivers Farmers' Market. I will be assigned a 10' by 10' space in the market upon acceptance of this application and payment of applicable charges.

Do you require more than one space - if so how many _____

I will be participating: Thursdays only _____; Sunday only _____; Both days _____

Seasonal vendors, choose days as above and enter below the first and last dates you will be at the Market.

_____ to _____

Do you require your vehicle as part of your booth? Yes _____ No _____

Do you: accept WIC ? _____ have CSA? _____

Forms of payment accepted: Cash _____ Check _____ Other _____

Is there anything else you would like Three Rivers Farmers' Market to know about your business or farm ?
(Please use back of this form or attach another piece of paper.)

PLEASE READ, COMPLETE AND SIGN THE FOLLOWING:

I understand the above questions and have answered them truthfully and to the best of my knowledge. I have also read and understand the "Three Rivers Farmers' Market Rules", and the "Policy re: Sampling of Food Products at Three Rivers Farmers' Market".

I declare that all items to be sold are my own products and were grown, created or produced in my presence and/or under my direct personal supervision.

I understand and accept that the Three Rivers Farmers' Market Board of Directors may approve or deny my membership. If denied I will be notified of the denial in writing and the reason(s) for the denial. If denied, I will be eligible to reapply the following year.

I understand and accept that if I am vending potentially hazardous/perishable foods (meat, cheese, tofu, fish etc.) I must provide a certificate/license from the Board of Health and have enclosed a copy with this application.

I understand and accept that I must verify my General and Liability Insurance Coverage to be a member of Three Rivers Farmers' Market and enclose a copy of my policy.

I understand and accept that I must verify my organic status from MOFGA by enclosing a copy of my certification with this application if applicable.

Insurance Company: _____

Policy Number: _____

Your Title: _____

Signature of Applicant: _____ Date: _____

Printed name: _____

Please mail completed application, all certifications, proof of insurance and payment made out to "Three Rivers Farmers' Market" to:

Three Rivers Farmers' Market
C/O Bruce Talley
PO Box 53
Milo, Maine 04463

For office use only:

Approved By: _____ Date of Approval: _____

Member notified of approval:

in person ___ ; by telephone ___ ; by email ___ ; by letter ___ Date _____