

# Albion Farmer's Market

William R. Stoffer Memorial Plaza

211 Market Place, Albion, MI 4922

Mailing Address: P.O. Box 725

Email: [albionfarmersmarket@albionedc.org](mailto:albionfarmersmarket@albionedc.org) - (517) 629-3343



Date: \_\_\_\_\_

Business Name: \_\_\_\_\_

Applicant's Name(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime phone: \_\_\_\_\_ Evening phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_ Email: \_\_\_\_\_

Web address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Vendor Type: Please check all applicable categories and then include a product list and brief description of your products. All vendors are subject to approval by the Albion Farmer's Market manager and Advisory Committee. See market policy for definition of each vendor type.

Direct Vendor \_\_\_\_\_ Representative Vendor \_\_\_\_\_ Artisan Vendor \_\_\_\_\_ Trunk Sale Vendor \_\_\_\_\_

**Summer Season** Full Season Rate: **\$95** Daily Rate: **\$7**

Summer Market: Full season is 19-20 weeks (19-20 market days) – Free booth rental in May for both full season and daily rate vendors.

Payment Plan for Summer Market Rate: \$50 at the first market in June, the balance of \$45 by July 31st. Vendors that want to join after the start of the season, and before July 1<sup>st</sup>, as a season rate vendor will have their season fee prorated. After July 1<sup>st</sup>, vendors will only be allowed to join at the daily booth rental rate.

Full season \_\_\_\_\_ Daily \_\_\_\_\_

I will be vending on the following days (for daily rate):

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## Winter Season

Winter Market: To Be Determined

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2024

Product List:

List any other items that you would like to bring to market or other interesting information:

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## CONSENT TO PHOTOGRAPH/VIDEO TAPE & DISSEMINATE WITHOUT COMPENSATION

I, \_\_\_\_\_, hereby give my consent to be photographed/video taped while participating in any activity offered by the Albion Farmer's Market. In addition, I consent to the reproduction and use of any such photographs and video tapes to be used for education, promotion, and or public relations purposes. I waive any claim by myself or anyone claiming through me under or through me, for compensation of any kind in exchange for such photographs and / or video tapes and use.

## Vendor Application Checklist:

I have read the Albion Farmer's Market Policy and agree to comply with all stated procedures. I have attached the following:

- \_\_\_\_\_ Application and product list
- \_\_\_\_\_ Copy of insurance
- \_\_\_\_\_ Copies of current Federal, State and local licenses
- \_\_\_\_\_ Copy of organic certification (if applicable)
- \_\_\_\_\_ Check made payable to Albion Farmer's Market

Payment and copy of all required licenses should accompany this application or your approval may be delayed. The Albion Farmer's Market operates on a 'first come – first serve' bases.

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I acknowledge that I have been given a copy of the Farmer's Market Policy and have read, understand and agree to abide by these rules as stated. \_\_\_\_\_ Initial

As a Vendor of the Albion Farmer's Market, I understand that I am not an employee of the City of Albion, MI and are not entitled to receive salary, benefits, or other compensation of any type relative to any services provided on behalf of the City. I understand that I do not qualify for worker's compensation benefits and shall carry personal medical insurance to cover medical expenses for any injuries I may incur while performing vending services.

**Agreement of Liability Wavier \_\_\_\_\_ Initial**

I, as a Vendor of the Albion Farmer's Market, Albion, MI agree to hereby release, waive, discharge, covenant not to sue, and agree to hold harmless for any and all purposes the City of Albion, Michigan, the Albion Downtown Development Authority, the Albion Farmer's Market, their officers, employees, successors, assigns, sponsors, and volunteers (collectively "the City") from any and all liabilities, claims demands, personal injury including death, or property damage that may be sustained by me while participating in the Albion Farmer's Market events, including injuries or damages sustained as a result of the negligence of the City of Albion, Michigan.

I, the undersigned, agree that the above information is true and accurate and to abide by the Albion Farmer's Market Policy, all state and local laws and ordinances. I understand that any false information or invalid or expired license(s) may result in the loss of privilege to vend at the market and forfeiture of pre-paid stall fee(s).

Vendor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Vendor/Farm Name: \_\_\_\_\_