Albion Farmer's Market City of Albion, Downtown Development Author 112 W. Cass Street. Albion, MI 49224 Email: info@albionfarmersmarket.com	ority	ALBION farmer's market produce • avt • food • craft 2025
Date:		
Business Name:		
Applicant's Name(s):		
Mailing Address:		
City:	State:	Zip:
Daytime phone:	Evening phone:	
Cell phone:	Email:	
Web address:		
Emergency Contact:		
<u>Vendor Type</u> : Please check all applicable categoroducts. All vendors are subject to approval b See market policy for definition of each vendor	y the Albion Farmer's Market mana	
Direct Vendor Representative Vendor	r Artisan Vendor Tru	unk Sale Vendor
Summer Season Full Season Rate: <u>\$95</u> Daily	v Rate: <b><u>\$7</u></b>	
Summer Market: Full season is 19-20 weeks (2 and daily rate vendors.	19-20 market days) – Free booth rer	tal in May for both full season
Payment Plan for Summer Market Rate: \$50 at that want to join after the start of the season, fee prorated. After July 1 <sup>st</sup> , vendors will only be Full season Daily	and before July 1 <sup>st</sup> , as a season rate e allowed to join at the daily booth r	vendor will have their season
I will be vending on the following days (for dail	y rate):	
Winter Season		

Winter Market: To Be Determined

Product List:



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



## 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.

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

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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:	D	ate:

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