

2020 Farmers Market Vendor Application

Non-Food/Arts & Crafts

Your Name _					
Business Nan	ne				
Reimburseme	ent checks payab	le to			
				Zip	
E-Mail					
		Business Phone			
Which numbe	r is best to reach	you quickly? 🗆 E-Mai	I □ Cell Phor	ne 🗆 Business Phone	
Emergency C	ontact		Phone		
Website/Face	book				
May we list yo	ou (including pho	tos) on the market web	site and Facebo	ook page? □ Yes □ No	
Vendor fee (d	choose one)				
☐ Pre-pay, ful	II-time (18 marke	ts): # of booths reques	sted x \$180	0 = \$	
	•	rket dates reserved be			
		3 p.m. each market da		· 	
=		ust be received one w	=	r first market.	
Pre-payment	method				
		o (\$SouthLansing) □ (Credit Card (call	office to process) □ Cash	
		oplications are due by	· ·		
			me, would you li	ike to be placed on our cal	
list for daily ve	endors? Yes	□ No			
Reserve Date	es				
Full-time vend	lors: please CRC	OSS OFF dates you are	e unable to atter	nd.	
Part-time vend	dors: please mar	k (X) dates you wish to	attend.		
June 18	July 2	Aug 6	_ Sept 3	Oct 1	
June 25	July 9	-	_ Sept 10	Oct 8	
	July 16	Aug 20	_ Sept 17	Oct 15	
	July 23		_ Sept 24		
	July 30	-	-		

Once approved, vendors are expected to attend every market indicated on this application.

at the market. These in	led list of all handmade items PROD nclude candles, lotions, jewelry, cera fts, home goods, etc. May NOT be p	mics, metal works, clothing and
Do you require electric	ity? □ Yes □ No	
"brokered" items is bas	rs may be allowed to sell items hand sed on specific criteria and granted a Policies & Procedures, VII.D).	
•	led list of all handcrafted items made the name and address of each produ	,
Product	Maker/Producer	Address/City/ZIP
License/Insurance/Ce	ertification	
•	licensed by the State of Michigan? es, please attach a copy of current lic	cense(s).
Do you carry general a	and/or product liability insurance for t	his business?

If yes, please attach a copy of current insurance certificate(s).

☐ Yes

□ No

Waiver of Liability

By my signature below, I hereby waive all claims and release, indemnify and hold harmless the South Lansing Community Development Association, its employees, interns, volunteers, board members, and funders from any and all legal and financial liability for injury, property damage, financial or other loss suffered or caused by me, my employees, and/or volunteers in association with my participation as a vendor at the South Lansing Farmers Market. This waiver and release applies to all current and future causes of action by me or on my behalf by family members, heirs, and assigns.

Please initial all of the following before signin	g below.
Procedures.	abide by the 2020 Farmers Market Policies & most, if not all, items to be sold at my booth each
Signed:	Date:
Printed Name:	
Please return completed Application to:	Kathy Tobe, Manager South Lansing Farmers Market 800 W. Barnes Ave. Lansing, MI 48910 (517) 374-5700

market@southlansing.org