

City of Grayling Farmers Market

P.O. Box 549

Grayling, MI 49738

VENDOR APPLICATION

I would like to be considered for participation in the Grayling Farmers Market. I understand that if I am accepted I will receive a letter of acceptance from the Market Manager.

Name_____

Mailing Address_____

City_____ State_____

Contact Phone_____

E-Mail Address_____

Who will be vending at the market-Name_____

Contact number_____

Please check ALL that apply

_____ Produce

_____ Art (made by me or a family member)

_____ Nursery Items

_____ Crafts (made by me or a family member)

_____ Maple Syrup or Honey

_____ Fish/Meat/Poultry

_____ Cheese/Dairy Products

_____ Eggs

_____ Herbs, spices, dry mixes

_____ Fresh Prepared Food

_____ Baked Goods (under the Cottage law)

_____ Other:_____

DETAILED DESCRIPTION OF PRODUCT(S) YOU WISH TO SELL/FARM LOCATION

I am requesting space for:

_____ Entire Season both days

_____ Entire Season one day

_____ Non-Seasonal basis

*Please specify day (circle one) Thursdays Saturdays

Signed:

The City of Grayling Farmers Market seeks to enhance the quality of life in the Crawford County area by:

*Providing a quality market and opportunity to our farming community to sell a variety of locally grown and made farm products to enhance community awareness of benefits to local grown products while promoting a healthier community.

*Encouraging relationships between the farmer and the consumers in our area and surrounding areas.

Market waiver & release 2018

_____, as indemnitor, agrees to indemnify, defend, and hold harmless the City of Grayling Farmers Market, Grayling, MI, the Market Master and Market Manager from and against any and all claims, losses, liability, cost or expenses (including reasonable attorney fees) arising out of bodily injury of any person or persons, including death, or property damage, relating to the use of City of Grayling property for the purpose of selling items at the City of Grayling Farmers Market during its seasonal operational schedule.

Additionally, indemnitor, including indemnitor's agents or employees, admits receipt of a copy of the City of Grayling Farmers Market rules and agrees to abide by the terms thereof. By signing this document thus binds the indemnitor to these guidelines.

Signature _____ Date _____

Vendor/Indemnitor

Signature _____ Date _____

Market Manager

THE MARKET MANAGER RESERVES THE RIGHT TO REJECT A VENDOR APPLICATION IF THE GOODS OR FOOD ITEMS ARE NOT COMPATIBLE WITH THE OVERALL CONCEPT OF THE MARKET.

For questions contact Therese Kaiser at (989) 348-2131. Applications can be e-mailed to: tkaiser@cityofgrayling.org or mailed to City of Grayling P.O. Box 549, Grayling, MI 49738.

2018 Sales Reporting Agreement

Dear Valued Vendors:

The Grayling Farmers Market will be seeking funding for our new Market through grants and other funding opportunities. This funding will allow us to continue to grow, maintain and improve both our indoor and outdoor Marketplace. Granting agencies and foundations require information pertaining to our Market. One piece of information consistently required is regarding the income generated through the Market by our vendors. This information helps support the data we provide as to number of visitors, viability of the market etc.

We are now going to be requiring equally from all vendors an anonymous report of your gross sales for each day you are at the Market. All vendors will be given a tally sheet on Market day and will be asked to fill it out and drop it in the designated area. This information will be viewed only by the Market Manager and reported to the City for purposes stated above.

Your signature on this document acknowledges that you agree to provide this information.

Vendor Name

Date

Vendor Signature