

Vendor Application

Poestenkill Farmers' Market & Craft Fair

Market Chairperson: Margie Morris
2 Franklin Street, Poestenkill, NY 12140
Cell: (518) 283-0693
Email: margieannmorris@gmail.com

Vendor Information:

Farm/Business Name: _____

Contact Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact phone: _____ Fax: _____

Website URL: _____

E-mail: _____

Sales Tax ID Number: _____

Farm/Business Address: (If different from above):

City: _____ State: _____ Zip: _____

- The Farmers' Market season is June 18th - September 24th (14 weeks).
- The Market is held on the front lawn of the Poestenkill Town Hall
- **Fees: \$10.00 per week or \$140.00 for the season for a 12'x12' space.**
- Fees are due **prior to setting up** on the day of participation.

If the products you offer for sale do not allow you to participate for the entire season, please indicate when you plan to start coming to market and when you are likely to finish:

___ I plan to attend the market for the full 14-week season. (\$140)

___ I plan to attend the market on a week-by-week basis. Dates requested:

Please provide a list of produce and/or products you intend to sell. _____

****Provide copies of all licenses and/or permits necessary to the types of products you are planning to sell; i.e. Board of Health permits, nursery license. FOOD VENDORS ONLY need to provide the market manager with a "Certificate of Insurance" prior to attending the market as a vendor.**

___ I have enclosed a check for \$140 for the full market season

_____ I have enclosed a check for \$_____ for _____ weeks (or will pay prior to setting up on a specific date)

Please make checks payable to: Margie Morris

Poestenkill Farmers' Market & Craft Fair

I, the undersigned, have read the **Rules and Regulations of the Poestenkill Farmers' Market & Craft Fair** and do agree to abide by all of the rules and regulations.

- I agree to operate my sale area in a safe and courteous manner and to pay fees as set forth by this agreement.
- I understand that failure to comply with the rules and regulations could result in dismissal from the market.
- I understand that the length of season, and hours of operation are determined by the market's management and even if I do not agree with them, I will abide by them.
- I verify that all information I have provided about my farm and products for sale is true and accurate.
- I understand that the payment of the subject fee shall not create any property rights.

Vendor name, please print _____

Vendor signature _____

Date ____/____/____

Indemnity Agreement

As a vendor wishing to rent space or attend as a guest vendor and participate in the Poestenkill Farmers' Market & Craft Fair, I do hereby agree to defend, indemnify and hold harmless the town of Poestenkill, Poestenkill Business Association, market managers, their members, agents, employees and contractors, from and against any and all liability, loss, damages, claims or actions (including cost and attorney fees) for bodily injury and/or property damage to the fullest extent permitted by law, arising out of or in connection with my participation in the Poestenkill Farmers' Market & Craft Fair and/or my rental of space and offering of goods for sale thereat.

Vendor name, please print _____

Vendor signature _____

Date ____/____/____