



Auburn Farmers Market

Vendor Application 2018

Farmer/Grower Specialty Food Artisan/Crafter

Date: _____ Name: _____ Phone: _____

Business Name: _____ BusinessPhone: _____

Address: _____ City: _____

State: _____ Zip: _____ Email: _____

Preferred method of contact from the public: Phone (Home) Phone (Bus.) Email Other

Do you accept credit/debit card(s) at the Market? Yes No

Are you interested in participating in the Food Assistance Benefits programs available? Yes No

Vendors interested in selling at the Auburn Farmers Market are encouraged to complete and submit the application and necessary copies of license and certifications. During our Grand Opening, we are waiving the \$25 nonrefundable deposit and offering an introductory daily rate with no minimum days required. The fee for each 12' x 12' space is a daily rate of \$10 for Thursdays and \$20 for Saturdays. Multiple spaces are available upon request at the daily rate. Vendor is to provide own table and chairs. Please see calendar for available market dates. Do you plan to be present Thursday, Saturday, or both?

Daily:

Thursday only daily = \$10 Saturday only daily = \$20

Annual:

Thursday only annually = \$175 Saturday only annually = \$250 Both days annually = \$375
**Savings of \$65 off Daily Rate *Savings of \$250 off Daily Rate *Savings of \$365 total discount*

***Based on 24 Thursdays and 25 Saturdays throughout Market Season.**

Please indicate which social media outlets your business utilizes:

Social Media	Yes/No	Page Name
Facebook	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Twitter	Yes <input type="checkbox"/> No <input type="checkbox"/>	
SnapChat	Yes <input type="checkbox"/> No <input type="checkbox"/>	
YouTube	Yes <input type="checkbox"/> No <input type="checkbox"/>	

Is your business certified organic? Yes No Please provide certification information with application. Indicate below if you or your business possess any other license or certification. If so, please provide a copy of your license and/or certification.

Type	Identification Number
Sales Tax License	
Commercial Kitchen License	
Nursery Market Dealer's License	
Apiary License	
Other	

Vegetables					
	Artichoke		Cucumbers		Peppers
	Asparagus		Eggplant		Potatoes
	Beans – Lima		Endive		Pumpkins
	Beans – Snap		Garlic		Radishes
	Beets		Kale		Rutabaga
	Broccoli		Kohlrabi		Salsify
	Brussels Sprouts		Leeks		Spinach
	Cabbage		Lettuce – Leaf		Squash - Summer
	Carrots		Mustard		Squash – Winter
	Cauliflower		Okra		Sweet Corn
	Celeriac		Onions		Sweet Potatoes
	Celery		Parsley		Swiss Chard
	Chinese Cabbage		Parsnips		Tomatoes
	Collards		Peas		Turnips
	Other:				
	Other:				

Fruits					
	Apples		Currants		Nectarines
	Apricots		Elderberries		Peaches
	Blackberries		Gooseberries		Plums
	Blueberries		Grapes		Raspberries
	Cherries - Sweet		Lingonberries		Strawberries
	Cherries - Tart		Muskmelon		Watermelon
	Other:				
	Other:				

Other Farm Products

Shrubs		Grave Blankets		Pussy Willow
Trees		Branches		Curly Willow
Herbs		Berry Branches	Other:	
Wreaths		Holiday Greenery	Other:	
Other:				

Specialty Food & Artisan/Craft Items

Baked Goods		Chocolates		Knitted/Crocheted Items
Honey		Dips		Pottery
Jams/Jellies		Gourds		Glass Works
Maple Syrup		Jewelry		Wood Carvings
Other:				

Annuals

Aster		Globe Amaranth		Pincushion
Bells of Ireland		Heliotrope		Salvia
Canna		Impatiens		Snapdragons
Coleus		Lobelia		Sunflower
Cosmos		Marigold		Sweet Alyssum
Dusty Miller		Mist Flower		Ten Week Stock
Firebush		Nierembergia		Wax Begonia
Flowering Tobacco		Periwinkle		Zinnia
Fuchsia		Pansy	Other:	
Geranium		Petunia	Other:	
Other:				
Other:				

Perennials

Anemone		Coral Bells		Milfoil
Artemisia		Cushion Spurge		Monadra
Aster Hybrids		Daylily		Peony
Bergenia		Delphiniums		Phlox
Bishop's Weed		Geranium		Plume Poppy
Bugbane		Hostas		Primula Hybrids
Bugleweed		Iris		Violet
Clematis		Lavender		Windflower
Chrysanthemum		Masterwort	Other:	
Columbine		Meadowsweet	Other:	
Other:				
Other:				

***Completed application must be returned along with payment and proof of insurance and/or certifications before the first scheduled Market day.**

I certify that the above information is correct and accurate. I understand that if I am approved as a Vendor at the Farmer's Market, then I will have to sign a separate agreement outlining the terms and conditions of the use.

Vendor Signature: _____ Date: _____

OFFICE USE ONLY

DATE APP RECEIVED: _____ STAFF MEMBER RECEIVING APP: _____

DATE INSURANCE RECEIVED: _____ FORM OF PMT: _____ CHECK # _____

DATE RECEIVED: _____ PAYMENT AMOUNT: _____

RECEIVED BY: _____ TABLE #: _____