

2018 Vendor Contract



Booth Number \_\_\_\_\_

Name of Vendor: \_\_\_\_\_

Name of Farm if Applicable: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

If sharing booth

Second Vendor Name: \_\_\_\_\_

address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Items for sale: \_\_\_\_\_

\_\_\_\_\_

Please Check which vendor you will be:

Annual \_\_\_\_ \*\*\*You must have been at the market in 2017 80% of the market days to be allowed a 2018 annual contract. If sharing a booth~ at least one vendor present 80% of the market days.

Monthly \_\_\_\_

Daily \_\_\_\_

You have read the Stuart Farmers' Market contract and agree to conform to set rules and regulations.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_