



WILLIAMSTON FARMERS MARKET

161 East Grand River, Williamston, Michigan 48895

Email: williamston.farmers.market@gmail.com

Telephones: 517-719-6193 or 517-655-2774 Fax: 517-655-2797

Sundays: 10 a.m. to 2 p.m.

21 May 2017 through 8 October 2017

Located in McCormick Parking Lot
One block North of the downtown traffic signal; corner of N. Putnam and High Street

2017 VENDOR APPLICATION

Check One: _____ New Vendor _____ Returning Vendor

Business/Farm Name: _____

Mailing Address: _____

Name of Primary Contact: _____

Primary Contact Phone(s): _____ Email: _____

Location of Business if different than mailing address: _____

Facebook: _____ Website: _____

Name of Emergency Contact: _____ Phone(s): _____

Workers/Helpers, Family, Alternate Contacts: LIST ALL INDIVIDUALS WHO WILL WORK IN YOUR MARKET BOOTH, ACT AS ON-SITE MANAGER OR AS AN ALTERNATE CONTACT PERSON.

NAME	PHONE NUMBER(S)	RESPONSIBILITY/DUTIES

PRODUCT CATEGORY (Check all that apply)

Arts/Crafts | Cheese | Eggs | Flowers | Fruit | Honey | Maple Syrup

Vegetables/Herbs | Animal/Pet Food & Treats (provide copies of applicable licenses)

Prepared Food (Provide copies of applicable licenses.) **If selling under Michigan Cottage Food Law, proper labeling is required on all products.** (Refer to *Michigan Cottage Foods Information* at the website http://www.michigan.gov/mdard/0,4610.7-1225-507722_45851-240577--,00.html)

Nursery Stock (Provide copies of applicable licenses.) (Refer to Michigan Department of Agriculture and Rural Development's publication *Nursery Stock Licensing Details and Frequently Asked Questions* at the following website: http://www.michigan.gov/statelicensesearch/0,1607,7-180-24786_24820-81466--,00.html)

Licensed Food Establishment (Provide copies of applicable licenses) | Other _____

The Williamston Farmers' Market strives to provide a venue for consumers to access the produce and product offerings of local farmers, artisans, and small businesses from the Williamston area. Quality of life in the Williamston community is enhanced by the opportunity for area residents and visitors to engage in sustainable commerce and social interaction with local farmers, entrepreneurs, and community members while supporting the local economy.

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PRODUCTS TO BE SOLD

Product: _____ Source: _____

Product: _____ Source: _____

Product: _____ Source: _____

Product: _____ Source: _____

Product: _____ Source: _____

Please continue on back of this page if you have more products to list.

VENDOR CATEGORY

- Farmer: I/we grow/produce 100% of the food that I/we sell.
- Farmer/Broker: I/we grow produce some food that I/we sell, and broker some food that I/we sell.
- Prepared Food Vendor: I/we prepare 100% of the food that I/we sell.
- Prepared Food Vendor: I/we prepare some of the food that I/we sell and broker some of the food that I/we sell.
- Artisans and Crafters: I/we manufacture 100% of the items that I/we sell.
- Artisans and Crafters: I/we manufacture some of the items that I/we sell and broker some items that I/we sell. **NOTE: No Buy/Sell allowed)**
- Dealer/Broker: I/we do not grow or produce anything I/we sell.
- Other _____

APPLICABLE LICENSES AND PERMITS: I, _____ hereby state that I possess and will display current licenses and/or permits that are applicable to the products that I sell and as may be required by the United States Department of Agriculture, the Michigan Department of Agriculture and Rural Development, the County Health Department, and/or the City of Williamston.

ADULT CONSENT TO PHOTOGRAPH and/or VIDEOTAPE and DISSEMINATE WITHOUT COMPENSATION: I hereby give my consent to be photographed and/or videotaped while participating in any activity offered by the City of Williamston, including the Williamston Farmers Market. In addition, I consent to the reproduction and use of any such photographs and videotapes by the City for educational, public relations and promotional purposes and I waive any claim by myself, or anyone claiming under or through me, for compensation of any kind in exchange for such photographs, videotapes and use.

REQUIRED

Vendor Signature: _____ Date: _____

Please mail or fax completed application to:
Williamston Farmers Market, 161 E. Grand River, Williamston, Michigan 48895
Fax Number: 517-655-2797

Direct questions to:
Marlene Ann Epley, Market Director, 517-719-6193 Email: williamston.farmers.market@gmail.com



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2017 VENDOR FEE SCHEDULE

VENDOR NAME: _____

Vendor Phone Numbers: _____

SEASONAL RATES

- NON-ELECTRIC SPACES

___ \$170 – 1st space \$ 170.00

\$150 each additional space

Number of additional spaces _____ X \$150 = \$ _____

TOTAL AMOUNT FOR SEASON = \$ _____

- ELECTRICAL ACCESS SPACES

___ \$218 – 1st space \$ 218.00

\$198 each additional space

Number of additional spaces _____ X \$198 = \$ _____

TOTAL AMOUNT FOR SEASONS = \$ _____

DAILY RATES

- NON-ELECTRIC SPACES

___ \$12 per space \$ 12.00

- ELECTRICAL ACCESS SPACES

___ \$15 per space \$ 15.00

Please direct questions to:

Marlene Epley, Market Director

517-719-6193

williamston.farmers.market@gmail.com

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