

Shelburne Falls



Farmers Market

Shelburne Falls Farmers Market 2020 Vendor Form

Please read and sign 2020 Rules and Regulations before filling out this form

Farm Name/Business Name: _____

Owner(s): _____

Phone Number: _____

Address: _____

E-mail Address: _____

Website (optional): _____

Please list all products intended for vending (*continue on back of form if necessary*):

Please check one of the following:

- Full Season 24 weeks -- \$250.00 (*equals roughly \$10.42 per market*)
- Half Season 12 weeks -- \$125.00 (*equals roughly \$10.42 per market*)
- Per Day: \$15.00 (*X number of days attending*)

(One per-day fee can be applied toward a half-season or full-season fee.)

• If you are a Full Season vendor and know you will **not** be coming on a particular day, please “X” that date.)

• If you will be coming for a Half Season or Per Day, please check the dates you will be attending.

(If we know when you will be coming, we will include you in our regular advertising for those weeks.)

	22 May		03 July		14 August		25 September
	29 May		10 July		21 August		02 October
	05 June		17 July		28 August		09 October
	12 June		24 July		04 September		16 October
	19 June		31 July		11 September		23 October
	26 June		07 August		18 September		30 October

If you are unsure of what days you will be coming, just let us know as soon as possible ahead of the intended market.

Please note that one Friday each month will be a special market day:

Solstice Celebration	19 June
Children’s Day	24 July
Barbeque Day	21 August
Customer Appreciation Day	25 September
Cider Day	09 October

Please include a brief (200-word limit) description of yourself and what you will be offering at the market. We will use this to advertise our vendors on our website. In addition, you can include contact information (phone, email, website address, etc.) that you would like to be posted as well. Also we hope to be able to include 1 or 2 photos for each vendor. Please use the space below for your description and public contact information.

Description (limit 200 words)

Contact Information that you'd like publicly posted by the Shelburne Falls Farmers Market, 2020

- email address _____
- phone number _____
- website _____
- other _____

Signature _____ Date _____

- Please include:
 - a copy of your any documents you have, such as business license, ServSafe, local Board of Health permits, FRCOG retail farm stand/farmers market permit
 - a **signed copy of Rules and Regulations**,
 - and payment with this Vendor Form. **Payments should be made out to *Shelburne Falls Farmers Market*.**

Mail to: Shelburne Falls Farmers Market
c/o Daniel Greene
Good Bunch Farm
221 North River Road
Shelburne, MA 01370

Applications received by 01 May 2020 will be given priority.