



PELHAM FARMERS MARKET 2021 VENDOR APPLICATION

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***APPLICATIONS MUST BE RETURNED TO JODI SHISHKOV
AT jshishkov@pelham.ca BY MARCH 12, 2021**

Business Name: _____ Contact: _____

Mailing Address: _____ Town: _____

Phone: _____ E-mail: _____

Social Media Handles (Ex. @TownofPelham): _____

If you would like to be featured on Pelham Farmers Market social media, please forward 3 jpegs to jshishkov@pelham.ca with your application

Do you require Hydro? YES NO

Address/ Location of Food Preparation (onsite at event? If not where?): _____

Water supply (city, private, cistern): _____

Please indicate if you have a commercial storefront: YES NO

Produce/Products – Please list all items to be sold. **Note: You will not be permitted to sell any item that is not listed herein.**

Percentage of product produced or grown by: self _____ %; others in Ontario: _____ %; outside of Ontario: _____ %.
Vendors MAY NOT allocate or sublet portions of their space to other growers for the purpose of selling goods, without express consent of the Pelham Farmers' Market Committee.

PLEASE INDICATE WHAT SIZE OF VEHICLE YOU WILL BE BRINGING TO THE MARKET



Cube Van



Panel Van



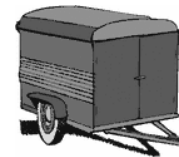
Mini Van



Pick Up Truck



Car



Trailer

Particulars of Vehicle:

Model: _____ Type: _____ License #: _____

SIZE OF VEHICLE MAY DETERMINE SPACE ALLOCATION

NOTE: The Market Clerk reserves the right to allocate final space locations

NOTE: Each vendor is required to have a sign stating their name and address on the front of their stall.

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FEE SCHEDULE

Please fill out appropriate choice. An electronic payment will be required upon approval to the market.

OPTION #1 – FULL SEASON, May 6, 2021 – October 7, 2021

Start date, if not May 6 _____

If you **do not** plan on attending the Market every week please indicate below which dates you **will** attend
Choose from the following:

May				June				July					August				September					Oct
6	13	20	27	3	10	17	24	1	8	15	22	29	5	12	19	26	2	9	16	23	30	7

* **NOTE:** On dates that you indicate you will **NOT** be attending; your stall will be assigned to a weekly vendor *

	FEE PER STALL	TOTAL FEE
Season	\$250.00	

OPTION #2 – WEEKLY

In an effort to plan ahead please indicate below which week/s you would be willing to attend the market on a weekly basis – the Market Clerk will be in contact with you to confirm what date/s your application has been accepted for. Preferred dates:

May				June				July					August				September					Oct
6	13	20	27	3	10	17	24	1	8	15	22	29	5	12	19	26	2	9	16	23	30	7

	NO. OF WEEKS	FEE PER WEEK	TOTAL FEE
Weekly		\$30.00	

I/We acknowledge and I/we shall be responsible for our actions of all those allowed or invited to the facility while we are entitled to use it, and I/we hereby release the Town of Pelham, its agents and employees from all manner of action, causes of action, suits, losses, damages or injuries caused by negligence or otherwise, (whether brought by me/us or any other person) arising out of my use of the facility and I/we also hereby indemnify the said Town, its employees or agents for any losses or damages sustained by me/us or any other person as a result of such actions or proceedings being commenced against them by myself/ourselves of any other such person.

INSURANCE REQUIREMENTS: Each vendor with a commercial store front must be covered by a liability insurance policy in the amount of \$2 million and provide the Pelham Farmers Market with a Certificate of Insurance naming the “Pelham Farmers Market” as an additional insured with 30 days’ notice of cancellation or non-renewal. If you do not currently have such coverage please check with your insurance provider.

I have read, understand additional insured and agree to abide by and be subject to the Pelham Farmers Market Policies and Procedures. In addition I have read, understood and had the opportunity to ask questions about the covid-19 Vendor Requirements, and agree that by participating in the Pelham Farmers Market during the COVID-19 Pandemic that I will follow the Vendor Requirements as outlined:

Signature: _____ Date: _____