## **St. Cloud Area Farmers Market**

## **2022 Guest Vendor Application Form**

Name of Busine	ss/Farm/Individu	ual Seller:			
Owner/s' Name	<u>/s:</u>				
Mailing Address	:				
City/State/Zipco	de:				
Telephone:	Email Address:				
Website Address:					
Insurance Comp	any and Policy N	lumber (attach a	a copy of policy):	:	
l am app	olying to be a Gu	iest Vendor at tl	he 2022 SCAFM	on the following date	/s: (circle dates)
May 7th	June 4 <sup>th</sup>	July 2nd	August 6th	September 3rd	October 1st
May 14th	June11 <sup>th</sup>	July 9th	August 13th	September 10th	October 8th
May 21st	June 18 <sup>th</sup>	July 16th	August 20st	September 117th	October 15th
May 28th	June 25 <sup>th</sup>	July 23rd	August 27th	September 24th	October 22nd
		July30th			October 29th
due: OR: I am a local "starving artist/	<u>artist/author</u> wh	no would like to	take advantage (	te total number of dators of the St. Cloud Area F	armers Market's
Describe in deta	il <b>ALL ITEMS</b> you	ı hope to bring			
	roduct(s) enhanc			s, etc.:	
Describe any rec		таспіту пізреспо	, cei illication	s, etc	

Note: Guest Vendors bring their own canopy, table, chairs, and all other required supplies

Upon receipt of your Guest Vendor Application, we will confirm your approval and the availability of your selected date/s, you will then have 5 days to mail your payment of \$20 for each approved date, along with your signed application form, and any copies of required insurance, licenses, certificates, inspections, and the ST19 form.

All Guest Vendor spots will be filled on a first-request basis and approved by the board at the monthly meeting (usually the 1st Monday of the month). All fees paid are non-refundable.

I understand that I will only be permitted to bring the item/s listed and approved on this application.

(Guest Vendor's Signature)

(Date)

All vendors are expected to be ready to sell at 8:00 a.m. and stay the duration of the SCAFM, and not start to teardown or leave before noon, without prior approval from the market master. No solicitations/promotion for customers or vendors, verbal or written, of any other Farmer's Market within a 10 mile radius and operating on the SAME DAY as the SCAFM will be allowed on site during the operation hours of any SCAFM event. Violation of these standards will terminate this Agreement.

Complete and email to: <a href="mailto:stcloudfarmersmarket@gmail.com">stcloudfarmersmarket@gmail.com</a> or mail to:

St. Cloud Farmers Market

P.O. Box 7071

St. Cloud, MN 56301