

INNISFIL
Farmers' Market



2017 Vendor Application - Indoor Market

Market Hours: Indoor Season, Thursdays - October 12, 2017 to December 21, 2017; 2pm – 7pm

Location: Innisfil Recreational Complex south lobby - 7315 Yonge Street, Innisfil ON

Farm/Business Name: _____

Contact Name: _____

Email: _____ Web-site: _____

Mailing Address: _____

Phone: _____ Fax: _____

Category: (please circle category that best describes your business)

Grower/Producer

Baker/Prepared Foods

Artisan/Artist

Farm Registration # _____

Participating 2017 Outdoor Vendor: Yes No

Membership Dues: \$28.25 (\$25.00 plus HST) to be submitted with application. Participating outdoor vendors do not require a membership for moving indoors within the same season.

Market Rates:

FEES MUST BE PAID IN FULL PRIOR TO YOUR 1ST MARKET DAY.

Full season (11 wks) prepaid - \$158.20 (\$140 + HST) 10 x 10 booth - plus yearly membership

Weekly rate - \$33.90 (\$30 + HST) - 10 X 10 booth - plus yearly membership dues

Hydro - \$22.60 season/\$5.65 day (\$20+HST/\$5 +HST). Hydro is subject to availability.
A proper extension cord is required.

Hydro* Yes No Rate: _____

Hydro requirement: (list equipment & draw watts/voltage) _____

Refunds will not be issued for weeks paid for but not attended by the vendor.

Fees must be paid in full prior to your 1st market day. Postdated cheques beyond this date will not be accepted. Please make cheques payable to "TOWN OF INNISFIL - FARMERS' MARKET".

Vendors must carry their own insurance for their booth and product. Applications must include; payment; signed Rules and Regulations, Code of Conduct and Conflict Resolution Process (unless on file from the outdoor market).

Vendors must list on the application ALL items for sale before being permitted to bring them to the Innisfil Farmers' Market. Additional products not listed on the vendor application must be approved by the Market Manager or an alternate Committee Member prior to being permitted for sale at the Innisfil Farmers' Market for that business session. The amended application will be reviewed by the Innisfil Farmers' Market Committee for acceptability and final approval for future markets.

List all items/products for sale. Please attach additional sheets if required:

| <u>Grown or Produced</u> | <u>Brought In</u> |
|--------------------------|-------------------|
| | |

Additional Comments:

All applications are subject to a farm visit.

Market Rules and Regulations:

- I agree that the information provided above is true and accurate;
- I have insurance coverage for my booth and product of at least \$2 million.
- I have obtained all applicable permits/licenses/certificates for the sale of my products.
- I shall indemnify and hold-harmless, the Innisfil Farmers' Market, its members, employees and the Town of Innisfil from all claims, demands, losses, damages and actions; that may arise.
- I have read and agree to comply with the Rules and Regulations, Code of Conduct and Conflict Resolution Process for the Innisfil Farmers' Market. I accept responsibility for my staff/volunteers on site. I understand that failure to comply with these rules may result in revocation or suspension of my membership.

Applicant (owner/operator) Signature & Commitment:

Signed: _____ **Date:** _____

Applicant check list for submission:

- Payment for membership dues.
- Payment for vendor booth (seasonal/weekly rates).
- Payment for hydro (if required).
- Cheque payable to "Town of Innisfil – Farmers' Market". (Cash payment is also acceptable).
- Completed list of items for sale.
- Signed application.
- Signed code of conduct.
- Signed rules and regulations.

Applications along with submission material can be mailed to:

Innisfil Farmers' Market
C/o Town of Innisfil
Attention: Christine Ayres
2101 Innisfil Beach Road,
Innisfil, Ontario L9S 1A1
(705) 436-3740 ext 1502

For Committee use only:

Submission Date: _____ Booth Size: _____ Hydro: Y / N Category: _____

Payment Received: Membership Fee: \$ _____ Booth Fee: \$ _____ Hydro Fee: \$ _____

Comments:

Approved: ___ Denied: ___ Authorized by: _____ Date: _____