

RICHLAND AREA FARMERS MARKET

2019 VENDOR APPLICATION/REGISTRATION AND PRODUCT AVAILABILITY

VENDOR NAME(S) _____

BUSINESS/FARM NAME _____

E-MAIL ADDRESS _____ Number of 10 X 10 Vendor Spaces Needed _____

CELL PHONE: _____

Do you have Vendor Liability Coverage? ___ Yes ___ No
(This is something we do recommend.)

HOME PHONE: _____

ADDRESS _____ CITY _____ ZIP CODE _____

IF SELLING PROCESSED FOOD ITEMS: ATTACH COPY OF CURRENT LICENSE TO THIS APPLICATION.

FEES PER SPACE	PAID	DATE	DATES
FULL SEASON	\$60	_____	Saturdays May 4 to October 12
HALF SEASON	\$40	_____	Saturdays May 4 to July 20 OR Saturdays July 27 to October 12
BY THE DAY	\$10	_____	May show up on a particular Saturday or plan ahead/ \$ due same day
FULL SEASON	\$40	_____	Wednesdays June 12 to October 9
HALF SEASON	\$25	_____	Wednesdays June 12 to August 7 OR Wednesdays August 14-October 9
BY THE DAY	\$10	_____	May show up on a particular Wednesday or plan ahead/ \$ due same day

I/We will accept:
FMNP _____
 (Sr. Nutrition Vouchers)
 A one time training is required:
 I/We need this! _____
 I/We have this already!

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EARLY SEASON May/June	MID-SEASON July/August	LATE SEASON September/October

I have read the information provided in the RAFM vendor brochure. I hereby declare that I will adhere to the rules and regulations set forth by the RAFM, State and Federal Regulations.

Signature

Date

If you are a farmer/producer please indicate the farming practices you adhere to:

Conventional -- Natural (following organic practices) -- Certified Organic

Certification# _____ Certifying Agency _____