



# 2016 Clemson Farmers Market Vendor Application

**Business Name:** \_\_\_\_\_

**Contact Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Mailing Address (If Different):** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Day Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Website:** \_\_\_\_\_

**Preferred Contact Method (Circle One):**      Phone                  Cell phone                  E-mail                  Mail

**Please specify products to be sold:**

- \_\_\_\_\_ Farm-grown produce
- \_\_\_\_\_ Handmade arts or crafts
- \_\_\_\_\_ Processed or value-added goods
- \_\_\_\_\_ Farm-raised plants or flowers
- \_\_\_\_\_ Eggs, meat, dairy products, honey

**Required permits**

Please list below and attach copies of all required permits.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**I Plan to Attend the Market on the Following Dates:** Please circle all that apply.

**May**      13      20      27  
**June**      3      10      17      24  
**July**      1      8      15      22      29  
**August**      5      12      19      26

**September**      2      9      16      23      30  
**October**      7      14  
**November**      4 (Harvest Market)  
**December**      2 (Holiday Market)

**Please List ALL Products to be sold at the Market:** (Use back of page if more space is needed.)

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**Please list ALL persons who may be staffing your Farmers Market booth and designate primary contact and number to call on Friday if necessary.** (Use back of page if more space is needed.)

<u>Name</u>	<u>Phone</u>	<u>Relationship to You</u>
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I hereby agree to indemnify and hold harmless the Market Partners (City of Clemson, Clemson Area Chamber of Commerce and Patrick Square, LLC), its employees, officers, agents and/or contractors for and against any and all damages, losses, suits, liability and/or causes of action resulting from property damage, and/or from personal injury, including loss of life, of myself arising out of or in any way connected with our participation in the Clemson Farmers Market, except to the extent that such damage or injury is caused by the gross negligence or willful misconduct of the Market Partners, and covenant not to sue or take action against the Market Partners, its employees, officers, agents and/or contractors except as set out herein. I further permit the Market Partners to use photographs of me for Clemson Farmers Market publicity. I acknowledge that I have not been offered exclusivity for my product.

All vendors participating in the Clemson Farmers Market must abide by these rules. The Market Manager shall enforce all rules and regulations. Permits to participate in the Clemson Farmers Market can be revoked by the Market Manager.

I have read, understand, and agree to follow all Clemson Farmers Market rules and regulations. I affirm that all statements made and information provided by me in this application are true and correct.

**Signature:**

**Date:**

**Permits & Licenses:** Please return signed, completed application, applicable verification forms, copies of all required permits, certifications, licenses, photos of artwork/crafts, and the \$25 permit fee (made payable to City of Clemson and \$25 vendor fee (made payable to the Clemson Farmers Market to the address below.

**Important:** No vendor can sell at the Market until all required documentation is received and approved by the market manager. Incomplete applications will not be considered.

**Clemson Farmers Market**

**c/o Clemson Area Chamber of Commerce**

**PO Box 1622**

**Clemson, SC 29633**