



Vernon Farmers Market 2018 Membership Application

Vendor Name (Farm/Business Name): _____

Contact Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Website: _____

I am a: (check all that apply, circle the one that is the majority of your sales)

- Farmer / Grower
- Produce Reseller
- Baker
- Other (list) _____

The market season will run from May 12th, 2018 through September 8th, 2018, with an additional Saturday in October. Please note that the length of the season may be extended or shortened depending on the weather.

I plan to sell on: (check all that apply)

- Saturdays
- Tuesdays

List all items you intend to sell at the Vernon Farmers Market. You can be general (e.g. eggplant, instead of listing each variety of eggplant you grow.) Attach additional sheets as needed.

Farm Information (produce/nursery/cut flower growers only)

For farmers, please provide the address or locations where your products are grown:

The Vernon Farmers Market Association reserves the right to inspect farms to ensure that they are in compliance with market rules and regulations.

Insurance and Indemnity

All authorized vendors participating in the Vernon Farmers Market (VFM) shall be individually and severally responsible to VFM, the City of Vernon (the City), and Wilbarger County (the County) for any loss, personal injury, deaths, and/or any other damage that may occur as a result of the vendor's negligence or that of its servants, agents, and employees. All vendors hereby agree to indemnify and save VFM, the City and the County harmless from any loss, cost, damages, and other expenses, including attorney's fees, suffered or incurred by VFM, the City and the County by reasons of the vendor's negligence or that of its servants, agents and employees; provided that the vendors shall not be responsible nor required to indemnify VFM, the City or the County for negligence of VFM, the City and the County, its directors, volunteers, servants, agents or employees. No insurance is provided by VFM to participants in VFM.

I hereby certify that I have read and understand the Vernon Farmers Market Rules, and I agree to abide by the Rules. I have read the Cottage Law and agree that sellers are responsible for abiding by all Texas State and Federal health and safety regulations. I acknowledge full responsibility for all my activities in VFM, and for those assisting me, throughout the term of this season's market. I agree to follow the directions of the Market Manager. I further agree that if there is an issue that needs resolution during the season, the Vernon Farmers Market Association Board will make the final determination, and I agree to abide by the Board's decision. The Market Manager may at his or her sole discretion allow me to sell on a provisional basis until a final determination is made. I certify that the information contained in this application is true and accurate.

Signature

Date

On behalf of

Vendor Name

For office use only; do not write in this section.

Date received: _____ Approved by: _____

Approval Date: _____