



Office Use only
Date rcvd. _____
Check/MO # _____
Check amt. _____

2010 Maple Grove Farmers Market Vendor Application

Every Thursday, June 10 - October 21 3 to 7 p.m. (3 to 6 p.m. in October)
Maple Grove Community Center parking lot, 12951 Weaver Lake Road, Maple Grove, MN 55369
Phone: 763-494-5955 Fax: 763-494-6454 Email: farmersmarket@ci.maple-grove.mn.us

Season stall fee must accompany this application for consideration at the Market.

PLEASE PRINT

Date of application: _____

Business/Farm name: _____

Name of primary seller: _____

Name of additional sellers: _____

Street address: _____

City: _____ State: _____ Zip: _____

Home phone: _____ Cell phone: _____ Fax: _____

Email: _____ Website: _____

Do you give permission to release your name, phone number, email and website to customers interested in contacting you for information and/or special orders? Yes _____ No _____

Address where crops are grown or items are produced: _____
(This information MUST be provided and we reserve the right to inspect location at any time before or during the market season.)

of market stalls requested: 1 (2 parking spaces) 1½ (3 parking spaces) 2 (4 parking spaces)

Limited (220 & 110) electricity is available for \$20 per stall.

Do you want electricity? Yes ___ Amps _____ No, I will provide my own _____ No, not needed _____

Do you grow or produce all your items? yes no

If not, please explain _____

Are your items certified organic? yes no If yes, you must include a copy of your National Organic Standard certificate as provided by a USDA accredited agent.

Do you practice chemical free farming? yes no

Are you selling any processed food items? yes no

Are you a registered Farmers Market Nutrition Program vendor? yes no no, but I am interested

Minnesota sales tax ID number (if applicable) _____

What food related licenses do you currently hold? (You must include copies of any license listed.)

Additional licensing from the Hennepin County Community Health Department may be required to participate in the market. Please contact this department at 612-543-5200 to ensure that you are fully licensed.

Please list all items you intend to sell at the market. Items *not* listed may *not be sold* at the market without prior Market Coordinator approval. Add additional page if necessary.

Please check **ALL** days you plan on attending the market. We understand your plans may change, and you must contact us if your attendance will be different than the days listed here.

- | | | |
|----------------------------------|--------------------------------------|---------------------------------------|
| <input type="checkbox"/> June 10 | <input type="checkbox"/> July 29 | <input type="checkbox"/> September 16 |
| <input type="checkbox"/> June 17 | <input type="checkbox"/> August 5 | <input type="checkbox"/> September 23 |
| <input type="checkbox"/> June 24 | <input type="checkbox"/> August 12 | <input type="checkbox"/> September 30 |
| <input type="checkbox"/> July 1 | <input type="checkbox"/> August 19 | <input type="checkbox"/> October 7 |
| <input type="checkbox"/> July 8 | <input type="checkbox"/> August 26 | <input type="checkbox"/> October 14 |
| <input type="checkbox"/> July 15 | <input type="checkbox"/> September 2 | <input type="checkbox"/> October 21 |
| <input type="checkbox"/> July 22 | <input type="checkbox"/> September 9 | |

Please check:

- I have read and agree to abide by all City of Maple Grove 2010 Farmers Market guidelines.
- I agree that the City of Maple Grove and the Maple Grove Parks and Recreation Board, and their respective officers, employees, agents and consultants are not liable for any injury, theft, or damage to either the buyer or seller, or their property, arising out of or pertaining to preparation for or participation in the Maple Grove Farmers Market; whether such injury, theft or damage occurred prior, during, or after the Maple Grove Farmers Market, Business/Farm further agrees to indemnify, defend and hold harmless the City of Maple Grove and the Maple Grove Parks and Recreation Board and their respective officers, employees, agents and consultants for and against any claims for such injury, theft or damage.
- I understand that it is recommended that I carry my own general liability and product liability insurance, as the City of Maple Grove does not provide this coverage.
- The City of Maple Grove takes pictures and videos of people participating in/attending the Maple Grove Farmers Market for use in marketing and promotional purposes. I grant permission to use the name, pictures, videos and quotes of my employees and myself for this purpose.

All applicants will be notified by mail as to the status of their acceptance as a vendor. Please note that full refunds will be given to any applications that are placed on the waiting list or not accepted. Call 763-494-5955 or email farmersmarket@ci.maple-grove.mn.us with questions or for more information.

Mail the following to: Maple Grove Farmers Market, 12951 Weaver Lake Rd, Maple Grove, MN 55369

- This **completed application** (above boxes must be checked and signature below required)
- **Photo of primary seller.** This will be used in creating a license which must be displayed by the vendor each week.
- \$_____ amount enclosed (make checks payable to the City of Maple Grove)
Vendor fee per stall is: 1 stall=\$200, 1½ stalls=\$300, 2 stalls=\$400
(1 stall = 2 parking spaces; 1½ stalls = 3 parking spaces; 2 stalls = 4 parking spaces)
Electricity is \$20

Signature of primary seller: _____ **Date:** _____