



2019 Prairie Township Farmer's Market Vendor Application

A Prairie Township Farmer's Market representative will contact you by phone/email to confirm availability and reservation. Once application is approved, fees are non-refundable. Before review of the application your insurance certificate and payment must be received.

Contact Name: _____

Farm/Business Name: _____

Address: _____

City/Zip: _____

Telephone: (____) _____ Fax: (____) _____

Email: _____

Web Site: _____

Insurance Company/Policy #: _____

(Include copy of Certificate of Insurance)

Do you sell cottage food products? Yes _____ No _____

Do your items require a Vendors License? Yes _____ (enclose a copy) No _____

Do you have a Mobile Food License? Yes _____ (enclose a copy) No _____

Do you accept WIC? Yes _____ No _____

Do you accept Senior Coupons? Yes _____ No _____

Please list the crops or goods you will be selling during the season:

Items Produced	Availability of Product	Price Range

Full Season Spots: (please mark your choice)

___ Single space with parking - \$100 ___ Double space with parking - \$115

Weekly Spots:

Single space with parking - \$10/week, 4 week minimum

Circle date(s) you would like to attend

6/10 6/17 6/24 7/1 7/8 7/15 7/22 7/29 8/5 8/12 8/19 8/26 9/9

Payment can be accepted in check or a credit card (Visa, Mastercard and/or Discover can be processed over the phone.

Make checks payable to: Prairie Township

Mail to:

Michael Pollack

Prairie Township Community Center

5955 West Broad St.

Galloway, OH 43119

Application Deadline: May 24, 2019

For more information contact: E-mail-mpollack@prairietownship.org Phone: 614-907-7995

By signing below, I agree on behalf of myself/company/organization/group to comply with the rules and regulations set forth in the 2019 Prairie Township Farmer's Market registration materials.

Signed: _____ Date: _____