



# Owen County Farmers' Market

PO Box 650 Spencer, IN 47460  
www.owencountyfarmersmarket.com  
2014 Market Board President, Andrea Curry 812.360.1166

## 2014 Farm Vendor Contract

**Please fill out completely.** Additional pages may be included if necessary. Print or type all information clearly.

### Vendor Information

Name of Primary Vendor: \_\_\_\_\_  
*First Last M.I.*

Name(s) of Additional Vendors: \_\_\_\_\_

Name of farm or business \_\_\_\_\_

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_  
*City State ZIP Code County*

Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_

Email \_\_\_\_\_ Website \_\_\_\_\_

Vendor Ages \_\_\_\_\_  
*Age 0-16 Age 17-59 Age 60+*

*Stand Assistant (stand assistant is a person who is not a qualified Market vendor, but is allowed to assist vendor at the Market)*

\_\_\_\_\_  
*Print full name of Stand Assistant Phone Number*

### Production and Product Information

*Location of land or production facility. If vendor utilizes additional location during the Market season, vendor must notify Market Board prior to cultivating or using land or facilities.*

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

\_\_\_\_\_  
*Township Town of County*

## Market Participation

- Full Season booth rental is \$150 for May 3, 2014 through October 11, 2014. Payment is due by May 3, 2013.
- Seasonal (12 weeks) booth rental is \$120. Payment is due before first market vendor will be attending.
- Daily booth rental is \$15 and is due on or before the Saturday the booth is to be rented (If vendor decides, after renting a booth for one day to participate for a full or seasonal season the rental fee of \$15 will be applied to the total rental.

## Owner of Land or Production Facility

If owner is not primary vendor, list complete name, phone number and address of landowner.

Name \_\_\_\_\_ Phone Number ( ) \_\_\_\_\_  
First Last

Mailing Address \_\_\_\_\_  
Street

\_\_\_\_\_ City State ZIP Code

Size of Growing Area \_\_\_\_\_ Acres

Greenhouses \_\_\_\_\_  
Location Size Number of

Greenhouses \_\_\_\_\_  
Location Size Number of

**For MEAT, DAIRY and EGG Vendors list number and type of animals you keep currently for Market purposes**

<i>Type of Animal</i>	<i>Count</i>	<i>Type of Animal</i>	<i>Count</i>	<i>Type of Animal</i>	<i>Count</i>
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<i>Type of Animal</i>	<i>Count</i>	<i>Type of Animal</i>	<i>Count</i>	<i>Type of Animal</i>	<i>Count</i>
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Name of processor \_\_\_\_\_

Location of plant \_\_\_\_\_

**List primary products you expect to sell at the Market in 2014**

- |         |         |         |
|---------|---------|---------|
| 1 _____ | 4 _____ | 7 _____ |
| 2 _____ | 5 _____ | 8 _____ |
| 3 _____ | 6 _____ | 9 _____ |

**License, Permit and Permission Information**

List expiration date and permits issued by regulatory agencies, as required. Vendor is required to produce a copy of license at the Market and attach the appropriate permit/license to the Contract. **Vendors selling Value added products such as meats, jams, bread, candies, etc. must also complete the Value Added Food Addendum Contract.**

Egg Vendor License \_\_\_\_\_

Other \_\_\_\_\_

**Identify the location(s), if applicable, where items are gathered and attached permission of property owner where gathered.**

\_\_\_\_\_

**Would you give the Market permission to release your name, address, telephone number, e-mail and website to customers interested in contacting you for information and/or special orders?**

YES  NO

**Terms of Agreement**

In consideration of my participation in the Owen County Farmers' Market and the opportunity to sell certain merchandise at Rob Babbs' lot in Spencer, Indiana, I hereby release the Owen County Farmers' Market, Rob Babbs, Owen County, Commissioners of Owen County, IN, and all of their agents, officers, representatives, successors and assigns, from any present and future claims, including negligence, for property damage, personal injury or death arising from my participation in the Farmers Market. I hereby knowingly and voluntarily waive any right of cause of action, of any kind whatsoever, arising as a result of any such activity from which any liability may accrue.

It is understood and agreed by the acceptance of this contract and by being permitted by the Owen County Farmers' Market (hereinafter Market) to offer items for sale at Rob Babbs' lot, the Vendor hereby assumes the entire responsibility and liability for any and all damage and injury to persons or property resulting from or arising out of any act or omission on the part of Vendor in connection with Vendor being at the Market and operating under this contract. Vendor shall hold harmless and indemnify the Market, Rob Babbs, Owen County and Commissioners of Owen County from and against any and all suits, claims, demands, losses, expenses, attorney's fees and court costs, which either or both of them may suffer, pay or incur as a result of Vendor's presence and operation at the Market. Vendor shall be responsible under this paragraph for any such loss, damage or injury sustained by Vendor, any agent or representative of Vendor, or by any third party or member of the public, whether the same is caused by the negligence of the Market, Rob Babbs, Owen County, its officers, agents, employees or otherwise.

By vendor signing the 2014 Farm Vendor Contract, they agree to abide by the Owen County Farmers Market Rules. A complete copy of the Rules can be provided upon request to the Market Master.

\_\_\_\_\_  
*Primary Vendor's Signature*

\_\_\_\_\_  
*Date*

Please attach copies of all appropriate paperwork.

Egg Vendor License

**FOR OFFICE PURPOSES ONLY**

Received  Approved  Denied  Notification

**Payment Received**

Cash  Check No. \_\_\_\_\_ Amount \$ \_\_\_\_\_ Date \_\_\_\_\_ Initials \_\_\_\_\_

\_\_\_\_\_  
*Market Manager's or Market Board Member's Signature*

\_\_\_\_\_  
*Date*