

Lincoln County Small Farmers Association PO Box 1633 Newport, Oregon 97365 541-961-8236 newportfarmersmarketmanager@gmail.com	2018 Newport Farmers Market Vendor Application and Agreement	Office Use Only	
		Date Received:	
		Fee Paid:	
		Licenses/Permits/Insurance:	
		Board Approval Date	
Other:			

VENDOR INFORMATION

Returning Vendor New Vendor Application

PLEASE PRINT CLEARLY

Vendor Name:		
Business or Farm Name:		
Address:		
City	State	Zip
Mailing Address if different:		
Home Phone	Cell	
Email		
Website		

If you are a returning vendor, how many years have you been a member of this Market?	YRS
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WEBSITE INFORMATION Vendors are responsible for contributing their business description and photo for the website, Facebook, our newsletter and other Farmers' Market related business. Please attach your photo and description to your application.
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I authorize the Market to post my name and email address on the Market's website and to provide this information to customers who request it.	Yes	No
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EMERGENCY CONTACT		
Name	Phone	Relationship

2018 Vendor Application and Agreement – page 2 of 4

Vendor & Business Name:

New Farms please include photos of farm, greenhouses, etc. Please indicate which of the following products you will grow or produce for sale at the Lincoln County Small Farmer's Market and dates of availability:

✓	Vegetables	Month Available	✓	Vegetables	Month Available
	Asparagus			Potatoes	
	Green Beans			Pumpkins	
	Cabbage			Peas	
	Carrots			Peppers	
	Corn, sweet			Squash, summer	
	Cucumbers			Squash, winter	
	Lettuce			Tomatoes	
	Mushrooms			Herbs	
	Onions			Other (please list)	

✓	Fruits	Month Available	✓	Fruits	Month Available
	Apples			Peaches	
	Apricots			Plums	
	Blueberries			Raspberries	
	Cherries, tart			Rhubarb	
	Cherries, sweet			Strawberries	
	Cider			Blackberries	
	Grapes			Boysenberries	
	Melons			Misc. Berries	
	Pears			Other (please list)	

✓	Miscellaneous	Month Available	✓	Miscellaneous	Month Available
	Bedding plants			Nursery Stock	
	Cut flowers			Ornamentals	
	Eggs			Other (please list)	
	Hazelnuts				
	Honey				
	Jams / Jellies				

2018 Vendor Application and Agreement – page 3 of 4

Vendor & Business Name:

Food Vendor (please describe in detail) – New vendors must include photos of all products.

Artisans / Crafters (please describe in detail) - New vendors must include photos of all products.

If you are a crafter adding a different medium or a farmer adding a value-added product you had not previously offered, please describe in detail. Include photos of your own products:

SPACE NEEDS

Please note: Spaces are assigned by the Market Manager. Returning vendors please make specific site requests if you have them.

Weekly vendor fees:

- 10' x10' Booth Space \$20.00
- Space with Vehicle \$30.00

Please check the space you need:

- 10' x 10'
- Space with Vehicle (Spaced limited and requires Market Manager approval)

Please list your Vehicle Descriptions with License Plate numbers:

SPECIAL NEEDS / REQUESTS

2018 Vendor Application and Agreement – page 4 of 4

Vendor & Business Name:

LICENSE, PERMIT AND INSURANCE REQUIREMENTS

Please refer to the **Market Rules** to assure all required licenses, fees and insurance documents are submitted with your application.

MARKET ATTENDANCE

Please indicate which market days you expect to attend:

May	June	July	August	September	October
12	2	7	4	1	6
19	9	14	11	8	13
26	16	21	18	15	20
	23	28	25	22	27
	30			29	

VENDOR AGREEMENT – Please initial and sign

The undersigned vendor (“Vendor”) fully and completely agrees to the following terms and provisions:

1. _____ Vendor has read and understands the Lincoln County Small Farmers Association **MARKET RULES.** Vendor is bound by the terms and conditions outlined in them.
2. _____ Vendor agrees to exercise the utmost care in the use of facilities and properties of the Lincoln County Small Farmers Association (“Market”), the City of Newport, Lincoln County and adjoining private and public properties.
3. _____ Vendor agrees to indemnify and hold harmless Lincoln County, the City of Newport, and the Lincoln County Small Farmers Association (“Market”), its officers, directors, employees and agents for all claims, actions, judgments, losses, costs, attorney fees, and damages whatsoever (“Claims”), including Claims arising by reasons of accident, injury or death caused to persons or property of any kind, arising out of, in connection with, or incident to the Market, except those caused by the sole negligence of the Market, Lincoln County or the City of Newport.

Vendor Signature: _____ Date: _____

By signing this Application, the Vendor agrees to abide by ALL Rules, Guidelines and Policies of the Lincoln County Small Farmers Association, Inc.

PLEASE RETAIN A COPY OF THIS SIGNED DOCUMENT FOR YOUR RECORDS