

Lincoln County Small Farmers Association

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LINCOLN COUNTY FAIRGROUNDS FARMERS MARKET 2018/2019 RETURNING VENDOR INFORMATION

PLEASE PRINT CLEARLY

Vendor Name:
Business or Farm Name:

Please let the Market Manager know if your contact information has changed.

If you wish to add items not listed on your original application after the market starts, you must submit an amendment to your application and items must be approved prior to being offered for sale.

MEMBERSHIP DUES – Have you paid your \$25 membership dues for 2017? Yes ___ No ___

HOW MANY YEARS HAVE YOU ATTENDED THE FAIRGROUNDS FARMERS MARKET? _____

PLEASE MAKE SURE THE MARKET MANAGER HAS ALL REQUIRED LICENSE AND INSURANCE DOCUMENTS

SPACE NEEDS

Weekly vendor fees:

- All spaces \$20.00 (approximately 10x10)
- Please indicate number of spaces needed _____

Electricity Yes _____ No _____ Type of Appliance _____

Special Requests _____

MARKET ATTENDANCE

Please indicate which market days you expect to attend:

Nov	Dec	Jan	Feb	March	April
3	1	5	2	2	6
10	8	12	9	9	13
17	15	19	16	16	20
24	22	26	23	23	27
	29			30	

Please let the Market Manager know in a timely manner as possible what dates you cannot attend.

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.