Town of Unicoi Farmers Market Vendor Application

Business Name:			
Applicant Name:			· · · · · · · · · · · · · · · · · · ·
Address:			
City:			r:
Cell #:		Home #:	
Email Address:			
Vendor Category (circle): Farm	n Products	Processed Foods	Handmade Crafts
Products to be sold:			· · · · · · · · · · · · · · · · · · ·
Level of Commitment (circle):	Weekly	Monthly Season	nal
Additional Comments:			
			
			
Each vendor agrees to indemnify a expense of any sort or nature arisi Market. Each vendor agrees to indeany person on account of any damand occupancy of spaces by a vend services, or for any failure of a ven requirements and provisions of the should I fail to comply with these sterminated.	ng by reason of emnify and holo age to personal lor, including ar dor to comply i ese operating ru	their participation as a ve d harmless the Town of Un or property resulting or o ny liability arising from the n any respect with or to pe ules and regulations. I furt	ndor at the Farmers nicoi from any liability to occurring by reason of use e sales of goods or erform any of the ther understand that
Name (Print):			
Date:			
Signature:			
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