



COLUMBIA FALLS FARMERS' MARKET 2017 VENDOR REGISTRATION FORM

Name and Business Name: _____

E-mail: _____

Business Facebook page and/or Web page (for advertising purposes) _____

Mailing Address: _____

Home Phone: _____ Cell Phone: _____

Description of the product(s) you plan to sell at the Columbia Falls Farmers' Market:

Description of setup (ex. 10'X10' canopy, card table, sell from vehicle, generator, etc): _____

Date you will be begin attending: _____

Please make your Check out and send to: Columbia Falls Farmers' Market, PO Box 3251, Columbia Falls, MT 59912

- Check here if you are a produce vendor wanting to reserve a seasonal space. (Agrees to pay 5% of sales up to a max of \$5 per week)
- Check here if you are a craft vendor enclosing a \$50 check to reserve a seasonal space.
- Check here if you are a food vendor enclosing a \$95 check to reserve a seasonal space.
- Check here if wish to pay weekly for your assigned space.

- The vendor (undersigned) gives permission to the Columbia Falls Farmers' Market, its members, its officers, employees, agents and sponsors for the recording, photographing, reproduction, and broadcasting/telecasting of any visual or aural occurrences during the events listed above or its preparation.
- The applicant assigns all rights to and releases from liability the Columbia Falls Farmers' Market Committee and the City of Columbia Falls, their members, their officers, employees, agents, sponsors and assigns, and all other persons, firms, or corporations liable or who might be claimed to be liable, none of whom admit any liability to the undersigned, but all expressly deny any liability, from any and all claims, demands, damages, actions, causes of action, or suits of any kind or nature whatsoever, and particularly without limitation on account of all injuries or claims, known and unknown, both to person and property, which may result or may in the future develop from any activities taking place in connection with the activities contemplated hereby.
- The applicant hereby indemnifies and agrees to defend and hold the Organization and its sponsors harmless from and against any claims, demands, loss, damage, or expenses resulting from the negligent acts or omissions of the Organization that may result in connection with the activities contemplated hereby or in the future may develop from any such activities.

I hereby certify that the information contained in this registration form is true and correct. I have read the general release and indemnity statement and the Vendor Regulations and will comply with them. I understand that it is my responsibility to make sure that anyone working with me at the Columbia Falls Farmers' Market has read, understood and will comply with this agreement and the Columbia Falls Farmers' Market Regulations.

Signature _____ Date _____