2018 JACKSON COUNTY FARMERS MARKET

FOOD VENDOR APPLICATION

Approximate Dates early June to late October



Applicant's Name	
Business Name	
Mailing Address City, State, Zip	
Email	
Food items to be sold at JCFM	
I plan to set up and sell food at the market on the following dates	
Can we include your business name in all JCFM mark	eting/promotions? Yes () No ()
Have you read and signed the JCFM VENDOR rules?	Yes () No ()
Have you provided proof of insurance to the JCFM Market Manager? Yes () No ()	
Have you provided all required licenses/certificates necessary to sell your products in the State of Wisconsin to the JCFM Market Manager? Yes () No ()	
I understand that for the 2017 market year, booth space for food vendors will cost \$10 per market day, to be paid each day present.	
Make checks payable to <u>Jackson County Farmers N</u>	<u>larket</u>
Acceptance of this agreement entitles the above v County Farmers Market. Please complete and retur WI 54615	• •
By signing this application, I accept and will adher JCFM:	e to the terms/rules governed by the
Signature of Applicant	Date