

# 2012 Hornell Farmer's Market

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## Vendor Application

Farm Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

Farm Address (if different from above): \_\_\_\_\_

E-mail: \_\_\_\_\_

Sales Tax ID Number: \_\_\_\_\_

Crops Grown: (Market management reserves the right to conduct spot visits and farm inspections.)

Other products you plan to sell, as allowed by the market's rules and regulations:

Do you plan on attending the market:

- The entire season
- Part time when I have products in season

If you are attending the market part time, what are the tentative dates? \_\_\_\_\_

- I wish to participate in the FMNP so that I will be eligible to accept FMNP coupons for my produce. I understand that to be eligible, 50% of the produce volume I sell must be grown by me.
- Provide copies of all licenses and/or permits necessary to the types of products you are planning to sell.
- I, the undersigned, have read the Rules and Regulations of the Hornell Farmers' Market and do agree to abide by all of the rules and regulations.
- I understand that failure to comply with the rules and regulations could result in the dismissal from the market.

I verify that all information I have provided about my farm and products for sale is true and accurate.

As a vendor wishing to rent space in the Hornell Farmers' Market, I agree to save, hold harmless, and indemnify the Hornell Farmers' Market, its sponsoring agency, members and employees from any and all liability or responsibility pertaining to any damages to person or property on the site leased by me from said market, when such damages, or liability, arise out of any acts of my own, or of my employees or associates, located at said site.

Vendor Name (please print) \_\_\_\_\_

Vendor Signature Date \_\_\_\_\_

2012 Market Advisors:

Hornell Partners for Growth

Tammy L. Whitney, Market Manager

June Pieklo, Exec. Dir.

282 Canisteo St.

Hornell, NY 14843

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