



Office Use Only	
Date rcvd _____	
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Electric needed <input type="checkbox"/>	

2016-2017 *Indoor Farmers Market* Application

THURSDAYS (Hours: 3 p.m. to 6 p.m.)

2016: November 3 & 17/December 1 & 15 **2017:** January 12/ February 9/March 9/April 13/May 11

Maple Grove Community Center (**INSIDE**)

Mailing Address for Market Correspondence: PO Box 1180, Maple Grove, MN 55311

Physical address of Market: 12951 Weaver Lake Road, Maple Grove, MN 55369

Phone: 763-494-5955 Fax: 763-494-6421 Email: farmersmarket@maplegrovern.gov

Website: www.maplegrovefarmersmarket.com

Payment of the vendor fee must accompany this completed application. Fee info on Page 2 and 3.

PLEASE PRINT

Date: _____

Business/Farm name: _____

Name of primary seller: _____

Street address: _____

City: _____ State: _____ Zip: _____

Home phone: _____ Cell phone: _____

Email: _____ Website: _____

You are being asked to supply certain information about yourself that may be private information. The requested information may be used by the Farmers Market staff, Administration department, and other City employees as reasonably necessary. The purpose of this requested information is to compile a list to allow the City to contact you with information regarding your status as a vendor, market related updates/questions, weather related closures, etc. Failure to supply the requested data may result in the delay of the City supplying you with information.

Do you give permission to release your name, phone number, email and website to customers interested in contacting you for information and/or special orders? Yes _____ No _____

List additional sellers and indicate relationship to primary seller (spouse, child, parent, friend, employee, etc.)

Name of additional seller	Relationship to primary	Name of additional seller	Relationship to primary

Each vendor will be provided with one 6'x3' table and two chairs.

Do you need electricity? no yes (You must provide your own extension cord.)

Please list all items you intend to sell at the market. Add additional page if necessary. Items *not* listed may *not* be sold without Market staff approval. If application is accepted, any additions to items sold must be submitted in writing and cannot be sold until approved by Market staff.

Please check **ALL** weeks you plan on attending the market.

- November 3, 2016 (\$20) December 15, 2016 (\$20) March 9, 2017 (\$20)
- November 17, 2016 (\$20) January 12, 2017 (\$20) April 13, 2017 (\$20)
- December 1, 2016 (\$20) February 9, 2017 (\$20) May 11, 2017 (\$20)

A \$20 discount (one market fee) will be provided for vendors who pay in advance, in full, for all 9 market dates. *Please note that payment for each market day must be received NO LATER than the Monday prior to the market.* Payment will not be accepted the day of the market and unpaid vendors will not be allowed to participate.

Do you grow or produce all your items? yes no

If no, please explain _____

Address where crops are grown or items produced: _____

(We reserve the right to inspect location at any time before or during the market season.)

Do you intend to offer samples of your product at the market? yes no

Are you selling any canned, processed, or baked food items? yes no

Are these items made in a licensed and inspected commercial kitchen? yes no

If yes, provide the name and address of the commercial kitchen: _____

If yes, you must provide a copy of your MN Dept. of Ag Retail Mobile Food Handler and/or other applicable license with this application.

Are these items prepared in your home? yes no

If yes, you must provide a copy of your Cottage Foods Producer Registration from the MN Dept. of Ag. with this application.

Are you selling meat products? yes no

If you are selling meat, please indicate name/address of processor:

What food related licenses do you currently hold? **(Include copies with this application.)**

Additional licensing from the Hennepin County Community Health Department may be required to participate in the market. Please contact this department at 612-543-5200 to ensure that you are fully licensed.

Completed applications and vendor fee due by Tuesday, October 4, 2016. Preference will be given to past participants with good attendance records and vendors that will enhance the variety of the market. Once a vendor is accepted, the fee is non-refundable.

Applications received after October 4th will be given consideration if space allows. Any applications not accepted will be returned with full refund of vendor fee. Call 763-494-5955 or email farmersmarket@maplegrovernj.gov with questions.

Please check:

- I have read and agree to abide by all City of Maple Grove 2016-2017 Indoor Farmers Market policies and guidelines.
- I understand that, once I receive written confirmation of my acceptance, fees paid are non-refundable, even if a conflict prevents me from attending one of the market dates I've chosen.
- I agree to accept Maple Grove Farmers Market tokens (debit, credit, promotional and if applicable, EBT tokens) from customers for payment of goods purchased and understand that I will be reimbursed for any market tokens submitted to Market staff. EBT token acceptance requires a separate agreement between Market and Vendor.
- I agree that the City of Maple Grove and the Maple Grove Park Board, and their respective officers, employees, agents and consultants are not liable for any injury, theft, or damage to either the buyer or seller, or their property, arising out of or pertaining to preparation for or participation in the Maple Grove Indoor Farmers Market; whether such injury, theft or damage occurred prior, during, or after the Maple Grove Indoor Farmers Market, Business/Farm further agrees to indemnify, defend and hold harmless the City of Maple Grove and the Maple Grove Park Board and their respective officers, employees, agents and consultants for and against any claims for such injury, theft or damage.
- I understand that it is recommended that I carry my own general liability and product liability insurance, as the City of Maple Grove does not provide this coverage.
- I understand that alcohol and drugs (unless used with prescription) are prohibited at the Market. Vendors must be drug-free and sober upon arriving at the Market. Violation of this policy is grounds for suspension from the Market or immediate revocation of vendor access, in the sole discretion of Market staff.
- The City of Maple Grove takes pictures and videos of people participating in/attending the Maple Grove Farmers Market for use in marketing and promotional purposes. I grant permission to use the name, pictures, videos and quotes of my employees and myself for this purpose.

Mail the following to:

City of Maple Grove Farmers Market, P.O. Box 1180, Maple Grove, MN 55311

- This **completed application** (above boxes must be checked and signature/date below required)
- **Fee (\$20 each market day)**
 - One market date: \$20 Four market dates: \$80 Seven market dates: \$140
 - Two market dates: \$40 Five market dates: \$100 Eight market dates: \$160
 - Three market dates: \$60 Six market dates: \$120 Nine market dates: \$180 (\$160 if prepaying for all nine market dates)
- I will pay by check, payable to the City of Maple Grove
- I will pay with a credit or debit card. I understand that Market staff will call me to process payment over the phone at the time my application is approved.
- **MN Department of Revenue Form ST-19 (submit only if you have NOT participated in a calendar year 2016 Maple Grove Farmers Market)**
- **Photo of your booth/product/display (new applicants only)**

Signature of primary seller: _____

Date: _____