



OFFICE USE ONLY

Date Paid: _____

Amount: _____

- Cash
- Check # _____
- Website Info
- All Support Docs
- Waiver Signed

ANNUAL VENDOR CONTRACT FOR CURRENT SEASON ONLY

<u>Stall Description</u>	<u>Stall Size (W X D)</u>	<u>Full Season (24 Weeks)</u>	<u>Partial Season (Per Saturday)</u>
Tent stall (Expansion Lot)	10' X 10'	<input type="checkbox"/> \$180	<input type="checkbox"/> \$15
Full table stall (Street/Grassy Plain Edge)	10' X 15'	<input type="checkbox"/> \$240	<input type="checkbox"/> \$20
Tent stall + angled parking (Expansion Lot)	10' X 10'	<input type="checkbox"/> \$350	<input type="checkbox"/> \$30
Truck/car stall	20' X 15'	<input type="checkbox"/> \$350	<input type="checkbox"/> \$40

ALL VENDORS

Please check all that apply:

- Garden* (Agricultural Products)
- Inspected Kitchen*
- Cottage Kitchen* (Home Kitchen)
- Studio* (Fine Arts)

Full Season Vendor

I will attend weekly unless the Market Master is notified in advance.

Partial Season Vendor

I plan to attend on these dates:

May: __, __, __, __, __

June: __, __, __, __, __

July: __, __, __, __, __

August: __, __, __, __, __

September: __, __, __, __, __

October: __, __, __, __, __

I understand that Partial Season stalls are reserved on a **space available** basis.

Print Name(s): _____

Business Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Product(s) I plan to sell: _____

Please check below to indicate your preferred contact for customer use.

Home Phone: _____ Work Phone: _____

Mobile Phone: _____ E-Mail: _____

The Market Manager is authorized to release my name and preferred contact indicated above to interested parties at her discretion: NO YES

My signature confirms I have received and will comply with the Rules and Regulations. I also recognize that The Land of Goshen Community Market takes video and photographs on a regular basis that may include me, my family, my products, or my market stall.

Signature: _____ Date: _____