



Main Street Farmers Market

Farmers/Food Producers

"Know your neighbors, know your food"

Thank you for your interest in our market. Our goal is to provide the local farmer/producer a place to **sell products he/she has produced**, at a family friendly community gathering, which promotes healthful living to our residents and visitors and stimulates our agricultural economy. Attached to this application is our mission statement, criteria for participation and operation policies. The market is held each Saturday from 9-1 from April 3rd until November 20th in the parking area of the downtown Sea Island Bank.

Vendor's Name: _____ Business Name: _____

Email: _____ Website: _____

Business Telephone: _____ Home Telephone: _____ Fax: _____

Cell: _____ Address: _____ County: _____

Please attach directions to your farm with this application.

Farmers & Growers:

Check each category in which you plan to bring product to market:

Fruits:___ Vegetables: ___ Herbs: ___ Flowers: ___ Eggs: ___ Dairy: ___ Nuts: ___ Mushrooms: ___

Bedding Plants: ___ Poultry: ___ Beef: ___ Fish: ___ Pork: ___ Other (please specify): _____

Processors:

Check the type of product that you plan to bring to the market:

Commercially produced Breads & Baked Goods: ___ Grits: ___ Cornmeal: ___ Flour: ___ Cheese: ___

Honey: ___ Jam & Jellies: ___ Ciders: ___ Teas: ___ Coffees: ___ Juice: ___ Granola: ___

Other (please specify): _____

How did you learn about the Main Street Farmers Market? _____

Would like to be nominated to participate on the Main Street Farmers Market Advisory Board? _____

Please indicate which weeks you anticipate participating in the market and what products you will be selling. This will help us develop a simple chart that lists seasonal availability of produce.* This also helps us to advertise your farm and your products.

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April	Check the anticipated weeks of participation.						
	May	June	July	August	September	October	November
3	1	5	3	7	4	2	6
10	8	12	10	14	11	9	13
14	15	19	17	21	18	16	20
24	22	26	24	28	25	23	
	29		31			30	

*If you grow a large variety of produce and would prefer to submit a separate spreadsheet containing your weekly produce availability, please feel free to submit that information along with this application. However, please use the above calendar to circle the Saturdays you anticipate participating in the Market.

There is a membership fee of \$50 to become a member of the Market each season. Also, space fees of \$10 and \$5, respective of space size per Saturday are required. Please refer to the attached by-laws and operation policy for fee schedules. The application will be reviewed by the Farmers Review Committee and assignment. The application must be turned in at least 7 days prior to the market in which you wish to participate.

Vendors/exhibitors must be set up by 9 am and are responsible for bringing their own tents, tables and signage all of which are **required** for participation in the market. The market manager will check you in to the market.

Hold Harmless Clause and Insurance

All authorized vendors participating in Main Street Farmers' Market are independent operators and not partners or joint venturers, and shall be individually and severally liable for any loss, personal injury, deaths, and /or any other damages that may occur as a result of the vendor's negligence or that of its employees, agents, and associates. All vendors are required to sign the Hold Harmless Clause included in the Market application. All vendors agree to indemnify and save Main Street Farmers' Market, Market Board, Sea Island Bank, Statesboro City Government and Bulloch County harmless from any loss, costs, damages, and other expenses including attorney's fees, suffered or incurred by Main Street Farmers' Market by reason of vendor's negligence or intentional misconduct or that of its employees, agents, and associates; provided that the vendor shall not be liable for nor required to indemnify Main Street Farmers' Market, Market board, Sea Island Bank, Statesboro City Government, or Bulloch County for the negligence of any of them or that of their servants, agents, employees or associates. Because no insurance is provided at Main Street Farmers' Market concerning vendors, **each vendor must carry his or her own personal and product liability insurance. Furthermore, vehicle liability insurance is required to cover any damage caused to persons or property by a vendor's vehicle.**

I acknowledge that I have read and understand this application, rules and regulations of the market and Hold Harmless Clause. I have been provided a copy of the Main Street Farmers' Market rules that govern this operation and will abide by these policies. I further agree to allow representatives of the Market to visit the premises where the products I intend to sale are grown/produced.
 Signed: _____ Date: _____

Mail or return this signed application with check made out to: Main Street Farmers' Market, Downtown Statesboro Development Authority (DSDA) 10 Siebald St., Statesboro, GA 30458, (912) 764-7227