



2020 VENDOR APPLICATION

Thursdays, June 4 - September 3, 2020

4:00– 7:00 p.m.

Corner of Lancaster and Main

Reynoldsburg, Ohio 43068

PH: 614-322-6839 Fax: 614-322-6880

Farm/Business Name: _____

Phone: _____

Contact Name: _____

Email: _____

Address: _____

Fax: _____

Website: _____

Make, model & license number of vehicle: _____

Please list the crops or goods you will be selling during the following months:

<u>June</u>	<u>July</u>	<u>August/September</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please indicate the date(s) you will be selling at the market:

- June 4
 June 11
 June 18
 June 25
 July 2
 July 9
 July 16
 July 23
 July 30
 Aug 13
 Aug 20
 Aug 27
 Sept 3

I will be selling from a _____ Truck _____ Truck & table _____ Table only _____



Weekly Fees

\$15 Weekly \$12 additional space Number of spaces needed _____
(Payment for weekly vendors is due before market opens.)

Seasonal rate (13 weeks)

\$ 156 for one space \$117 for additional space Number of spaces needed _____

Same space as last year ? yes or no (circle) ***Deadline to register for seasonal rates is Friday, April 30, 2020

Please read all rules and regulations, sign the agreement listed below, and submit both pages of this application along with your payment.

Make checks payable to: *Reynoldsburg Farmers' Market*

Mailing address: 7232 E. Main Street
Reynoldsburg, Ohio 43068
ATTN: Farm Market Manager

Total amount enclosed: _____

(Fees are non-refundable once the application is approved.)

Include with your payment: _____ Signed Application (2 pages) _____ Directions to your farm
_____ Copy of Liability Insurance (see # 12 of Rules and Regulations)

Please check all that apply to you:

- _____ I accept credit/debit cards
- _____ I accept Senior Farmers' Market Nutritional Program vouchers
- _____ I accept SNAP (also know as Ohio Direction Card, EBT or "food stamps") Service provided by Market at no cost
- _____ I accept Women, Infants & Children Farmers' Market Nutrition Program

By signing below, I agree to comply with the rules and regulations set forth for the 2020 Reynoldsburg Farmers' Market

Signature: _____

Date: _____

Print Name: _____

— For office use only —

Date Received	Amount received	Check #	Cash
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____