Homer Farmers' Market P.O. Box 2274 Homer, AK 99603 www.homerfarmersmarket.org (Applications are available online.)

Market Manager (907) 299-7540 manager@homerfarmersmarket.org

Date Paid ___

HOMER FARMERS' MARKET

Check #____Cash Amount _ **CRAFT VENDOR APPLICATION FORM** Policy Handbook road and

For Year (Due by Annual Meeting in January)			received	
The Policy handbook is part of this ap handbook and attach the signature pa		required to rea	ad the policy	
Name:	Phone:	Cell:		
Business Name:			_	
Mailing Address:	City:	State:_	Zip:	
Email Address:				
(E-Mail add	ress is required for marke	et communicat	ons)	
Would you like our E-Newsletter?	□Yes □No			
Describe in detail the crafts produced attach additional descriptions. Photos		ocal resources	are used. (You may	
Products not listed above must be pre	e-approved by the market	t board.		
Please check the fees w	hich you are including	with your app	lication:	
☐ Membership Only (all vendors, in	cluding shared space vendors \$25.00 per year	, must be member	rs in good standing):	
☐ Full market season booth fees are	\$395.00 + Membership	Fee of \$25.00	= \$420.00	
NOTE: Day fees will be paid onsite	e at markets vended			
Do you plan to set up a structure o	n your booth space?	□Yes	□No	
Are you requesting a full season bo	ooth space?	□Yes	□No *	
*If no, when do you wish vend?				

Will you also be selling any produce or food products? If so, you need to submit a Non-Craft Vendor Application also- attach it to this application

(FLIP OVER- Please complete the back side of this application)

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I have read and understand the Policy Handbook and I agree to conform to the Market Regulations.					
Craft Vendor Name	Signature		Date		
HOMER FARMERS MARKET HOLD HARMLESS AGREEMENT					
By signing below, Vendor, and keep and hold harmless the Hold Homer Farmers Market Director Volunteers, their agents and rewhether for injuries to persons out of the use or occupancy of Vendor's Agents further agree Mrs. Lawer) of the Homer Farmexpense, including but not limit of any and all claims and demand	omer Farmers Market, or/Manager, and all other epresentatives from ar, loss of life, or damage the premises by Venoto defend, indemnify, ners Market lot on Octed to judgments, settle	Homer Farmer her Homer Farn nd against, any a le to property, o dor and Vendor' and save harml ean Drive, from	rs Market Board of Directors, mers Market Employees and and all claims and demands, on or off the premises, arising is Agents. Vendor and less the Landowners (Mr. and and against all loss of		
A Hold Harmless statement is complete application.	included in the applica	ation; signature	is required as part of a		
Vendor Name Signed		Date			
Vendor Name Printed					
Vendor Business/Booth Name					

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