WESTMINSTER FARMERS’ MARKET 2024

Farm/Business Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Owner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State:\_\_\_\_\_\_\_\_Zip: \_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Web Site or Web Presence\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List your website or another website such as localharvest.org or etsy.com in which you list your business

I EXPECT TO HAVE PRODUCTS TO SELL FROM: (Date) \_\_\_\_\_\_\_\_\_TO \_\_\_\_\_\_\_\_

Initial \_\_\_\_\_\_ I have read and understand the Westminster Farmers’ Market Rules and agree to abide by them.

Initial \_\_\_\_\_\_ I understand the regulations of the Westminster Board of Health and agree to abide by them. Initial \_\_\_\_\_\_ I have read and understand Massachusetts Sales Tax Laws and agree to abide by them.

Check One:

\_\_ Enclosed is my check payable to Westminster Farmer’s Market in the amount of $235.00 for a 2024 Annual Membership. ($185 if attending vendor registration night – first Wednesday in April, 6:30 pm – place to be announced)

\_\_I am joining as a per diem vendor and will pay $20.00 for each day that I am present at the Westminster Farmers’ Market until the annual fee has been paid.

Participation at the Westminster Farmers’ Market can be terminated, without refund, for refusal to follow the rules of the Westminster Farmers’ Market and the rules set forth by the Westminster Board of Health. The Westminster Board of Health governs all health and food regulations and has the final say in any disagreements regarding them.

Signed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

All applications are subject to review by the Westminster Farmers’ Market Jury Committee. If your application is not accepted, your fee will be refunded in full.

Write a description of your business for use on the Westminster Farmers’ Market website.

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Return this form to: M.L. Altobelli, Westminster Farmers Market, 260 Davis Road, Westminster, MA 01473 before April 10, 2024

**Craft Vendor Application 2024**

If you plan to sell craft items at the market, fill in this page of the application.

Write a comprehensive list of EVERYTHING you plan to sell at the farmers’ market. You will only be approved for what you list here. If you anticipate any additions to your product line mid-season, even if not confirmed, you must list it on your application:

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