

**GODERICH BUSINESS IMPROVEMENT AREA
FARMERS' AND FLEA MARKETS
VENDOR APPLICATION AND AGREEMENT
2015 SEASON (May 16- October 11, 2015)**

Vendor: Farmers' Flea Both

Name: _____
(please print)

COMPANY NAME (if applicable): _____

Phone: _____ E-Mail: _____

Address: _____

City/Town: _____ Postal Code: _____

New Vendor? _____ If previous vendor, years attended? _____

I will attend: For the season _____ Week by week (date to start?) _____
(Options: seasonal vendors - May pay in full or deposit 50% by May 8th, and final 50% by June 26th)

I require access to hydro? _____ If yes, indicate type/size of appliance: _____
(Cost \$2/day or \$40.00/season. Advance planning is required)

Comments: _____
Goderich Farmers' Markets reserve the right to relocate weekly vendors due to questionable weather.

PRODUCT(S) FOR SALE: _____

This will confirm that the applicant has read and agrees to abide by; the attached Goderich Farmers' Market 2015 Rules and Regulations.

ALL Food Vendors are required to register with the Huron County Health Unit prior to Market.

Applicant's Signature: _____

PLEASE COMPLETE AND RETURN:

BY FAX - 519 524 1466

OR MAIL - BIA Farmers Markets, 57 West Street, Goderich, ON N7A 2K5

Inquiries Welcome: Farmers Market Coordinator George Blackwell- 519-524-6711

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