

# McCall Farmers Market

## Vendor Application

Vendor Name: \_\_\_\_\_

Business Name: \_\_\_\_\_

Booth worker if different than above: \_\_\_\_\_

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

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

Website Link: \_\_\_\_\_

Facebook Link: \_\_\_\_\_

Instagram Link: \_\_\_\_\_

Please Circle Vendor Type: Producer Artisan/Crafter Value Added Ready Eat  
Items to sell at Market (please list in detail so we can publicize for you):

\_\_\_\_\_

\_\_\_\_\_

Size of booth: \_\_\_\_\_

Accepted payment types: \_\_\_\_\_

Vendor State Sales Tax # (required after acceptance) \_\_\_\_\_

### Please circle or check your intended participation dates

Wed/June	Sat/June	Wed/July	Sat/July	Wed/Aug	Sat/Aug	Wed/Sept	Sat/Sept
N/A		1	4 (10am-2pm)		1	2	5(10am-2pm)
N/A		8	11	5	8	9	12
10	13	15	18	12	15	16	19
17	20	22	25	19	22	23	26
24	27	29		26	29	30	OCT 3

