

Richmond Farmers' Market 2026 Application

Name _____

Farm/Business Name _____

Address _____

Phone # _____ Email _____

Website _____

Circle your Growing Method: Conventional Chemical-Free Certified Organic

Do you have employees other than family members? YES NO How many _____

How far from the Market is your Farm or Business? _____

Liability Insurance Company & Policy # _____

MN Sales Tax Id # (if applicable) _____

How many Farmers Markets do you currently attend and where?

We anticipate the Market will run from June 1st through Oct. 5th. Please indicate when you begin vending and if able to note dates you would not be able to attend?

_____ I have read the Market Rules and Regulations and agree to abide by them. Please Initial

_____ I agree that the Market organizers, the City of Richmond, Jill's Café and other Vendors are not liable for any injury, theft, or damage to either the buyer or seller of the Richmond Farmers Market on Market Days. Each individual Market Vendor is responsible for their own personal property and market supplies and goods.

Sign _____ Date _____