Wilmot Farmers Market 2024 Application & Liability Waiver Form

Mail this completed application form **with payment** (checks made payable to Wilmot Farmers Market): Wilmot Farmers Market, c/o Laura Kilkenny, 4 Powers, Road, Danbury NH 03230

The Wilmot Farmers' Market is held rain or shine. Vendors are expected to attend regardless of weather conditions

Your Name (s)			
Your Business or Farm Name	Check here if this is a registered Non-Profit Organization		
Mailing Address			
City, State, Zip			
Business Physical Address if different			
Email address	Do you wish to have your email listed on WFM website? Email address:	Yes	No
Web Site Address	Do you wish to have your website listed on WFM website? website address:	Yes	No
Facebook	Do you wish to have your Facebook page on WFM website? www.facebook.com/	Yes _	No
Phone Number	() Do you wish to have your phone number listed on WFM website?	Yes	_No
List ALL products you request to sell			
Place a check mark on the line after the dates you will attend.	June 15 June 22 June 29 July 6 July Aug 3 Aug 10 Aug17 Aug 24 Aug31 Sept 21 Sept 28 Total the number of dates checked and place the number here	713 July 20 _ Sept 07	July 27 _ Sept 14
Full time vendor 10' by 10'space	You have checked 12 or more dates above. Your fee is \$ on or before March 2, 2024. Full-time vendors that miss moseason, which runs June 15-September 28, put their priority season.	ore than 4 marke	
Part time vendor 10' by 10' space	If you have checked 12 or less dates above, your fee is \$20/per week for the first 6 markets. After 6 markets, the fee is to \$15/market with a season maximum of \$150.		
Acceptance of Rules & Health Guidelines I certify that I am 18 years of age or older and have read and understand the Application, the Information, Guidelines, and the By-Laws which are available online at Wilmotfarmersmarket.com. If accepted into this Market, I agree to abide by said rules, procedures, and guidelines. Further, I agree to sell only such items that I have produced and only those listed on this application unless granted by the WFM at a later date through an additional written request. I also acknowledge that all of my products stated in application may not be accepted and that saleable products are determined by the Board. I also certify that any chemicals used in the production of the produce I grow were used in accordance with the current label instructions (if applicable). Processed food such as jam, jelly, preserves, or baked goods shall conform to the New Hampshire Labeling Laws and Sanitary Code. (Bureau of Consumer Protection, Division of Public Health, Concord, NH 603-271-4589) Vendors selling by weight			
	this is the responsibility of the vendor. (Bureau of Weights and Measu		
The undersigned hereb	Indemnification and Release of Liability y agrees to release and hold harmless from all liability the Towl	n of Wilmot and T	The Wilmot
Farmers Market for property being waives, releases, and d	perty being exhibited and from any personal injury claims that reperty being exhibited and from any personal injury claims that reperty being exhibited on the Wilmot Town Green and vendor's participation is charges any and all claims for damages: for personal injury, company have accrued as a result of activity at the Wilmot Farmers' Market. !! IMPORTANT!!	might arise as a d n in the Market. \ death, or property o	irect result of the endor hereby
Your signature below denotes your acceptance of the terms set forth in this application.			
_	Signature:		Date:

Date Received

Date Vendor Notified

Date Of Decision

Approved

Not Approved

Wilmot Farmers Market Use ONLY

Notes: