



Spring Artisan Market Application Form 2024

Our Spring Artisan Market will be held on May 8, 2024. Vendor applications are due by April 5, 2024.
See our [Inclement Weather & attendance policy](#)

This application is for Artisans Only. Please visit www.farmersonthesquare.com if you are a FOOD VENDOR.

Business/Stand Name: _____

Address: _____

Contact Person's Name: _____

Phone Number: _____ Email: _____ Website: _____

1. Products to be sold: Please list here any products to be sold at the stand. Please be as specific as possible. Use extra page(s) if necessary.

- Items listed here are the *ONLY* items a vendor is allowed to sell this season unless an amended application is submitted and approved by the Board.
- % of total stand is based on your projections- give us your best guess!

Product	% of stand total

Product	% of stand total

2. If you hope to resell another producer's product, please list the source & items below (*review Operating Guidelines 1c on resale first*).

Product(s)	Source name and address	% of total stand

3. Indicate your expected space requirements:

Our Artisan Market takes place from 3pm - 7pm.
Please initial beside your required space and associated fee.

One Tent (10ft x 10ft) = \$40/day _____

Two Tents (10ft x 20ft) = \$80/day _____

Please ensure that you are able to set up your stand within the allotted space provided as space may be scarce. You are required to bring your own supplies to participate (tent, tables, signs, etc), and to let the Market Manager know as early as possible of any additional accommodations or requests that are not covered in this application.

4. Please indicate your preferred unloading time (vendors must be ready to sell promptly at 3pm):

1:30 - 1:45 ____ 1:45 - 2:00 ____ 2:00 - 2:15 ____ 2:15 - 2:30 ____ 2:30 - 2:45 ____

5. Do you have General Commercial Liability insurance of at least \$1,000,000 per incident, \$2,000,000 aggregate?
Please circle one: **YES** or **NO**

NOTE: If accepted, you will be required to list the following two parties as additionally insured AND will be required to scan and submit a copy of your certificate of insurance to friendsofthefarmers@gmail.com:

- Farmers on the Square, 2A North Hanover St., Carlisle, PA 17013
- First Presbyterian Church of Carlisle, 2A North Hanover St., Carlisle, PA 17013

By signing below, I certify that I am the producer of the products listed above in #1 of this application.

Signature: _____ Date: _____

By signing below, I certify that I have read, understand and will adhere to all guidelines in the Farmers on the Square [Operating Guidelines document](#), including the insurance requirements acknowledged in section 5 of this application. I further understand that should I fail to comply with these specified guidelines, my participation in Farmers on the Square could be terminated.

Signature: _____ Date: _____

Application Deadline: All materials due **April 5th, 2024.**

Application checklist:

- Complete supporting documents (required):
 - Insurance: 1 copy with list of additionally insured as outlined in the application.
 - Required certifications (1 copy)
 - Any additional certifications (1 copy)
- **Do not send payment until your application is approved. You can pay at the market on the day of event or send your payment via mail to:**
 - Farmers On The Square**
 - PO Box 988**
 - Carlisle, PA 17013**
- **Retain a copy** of this application for your records.

Please send completed application to:

Farmers on the Square

Friendsofthefarmers@gmail.com

OR

**PO Box 988
Carlisle, PA 17013**