



Application for Winter Market, January-April 2024

Winter Market will run **weekly** on the Square from 2-5pm, January-April 2024

See our [Inclement Weather & attendance policy](#)

Farm / Cooperative Stand Name:

Contact Person's Name: _____

Mailing Address: _____

Farm Address (if different from above): _____

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 (i.e. grass fed beef vs. meat; yeast breads vs. general baked goods). Use extra page(s) if necessary.

Product	% of total

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2. If you hope to resell another farmer's product, **that is not listed on your regular application**, please list the source & items below (review *Operating Guidelines 1c on resale first*).

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

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3. Indicate your preferred level of participation:

Note: Winter Market runs weekly on the Square from 2-5pm, January-April 2022

Full Winter market vendor (17 weeks): **\$300** _____

Half Season Winter market vendor (8 weeks): **\$150** _____

Select one:

Alternating weeks _____

First half season _____

Second half season _____

Winter Occasional vendor:

Dates Requested _____ X **\$40/day** = _____

4. Please indicate your preferred unloading time (vendors must be ready to sell promptly at 2pm):

12:30 – 12:45 _____

12:45 – 1:00 _____

1:00 – 1:15 _____

1:15 – 1:30 _____

1:30 – 1:45 _____

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](#). 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 Deadlines:

- Full Winter Market vendors: **November 8th, 2023**
- Occasional and Guest vendors: **at least 3 weeks prior to first requested participation date**

Application checklist:

- Completed Application Form
- Cooperative Stand Participants forms (if a cooperative stand)
- If a new vendor, 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 or mail payment to the address below.**
- **Retain a copy** of this application for your records.

Please send completed application to (email preferred but not necessary):

Friendsofthefarmers@gmail.com

Or mail to:

**Farmers on the Square
PO Box 988 Carlisle, PA 17013**