



Isanti Family Farmers Market (IFFM)

2017 Vendor Application

Fridays ► May 26 – September 29 ► 2:00pm - 6:00pm
400 West Dual Blvd, Isanti, MN

Market Manager - Katie Everett

Office: 763-444-5512 Cell: 763-772-5856 Email: isantiparks@cityofisanti.us

CONTACT INFORMATION:

DATE _____

NAME of primary seller _____ **FARM NAME** _____

NAME of additional sellers _____

ADDRESS _____ **CITY** _____ **ZIP** _____

EMAIL _____

HOME PHONE _____ **CELL PHONE** _____

WEBSITE _____

You are being asked to supply personal information about yourself and business. The requested information may be used by the IFFM staff, administration department and other City staff as reasonably necessary. The purpose of this requested information is to compile a list to allow the City to contact you with information regarding your status as a vendor, market related updates and questions, weather related closures, etc.

Please check if you **give permission** to release the above information for customer inquiries and marketing purposes. If exclusions, please list: _____

VENDOR INFORMATION (please circle and give details):

Address where crops are grown or items produced if other than above _____

Do you grow or produce all items offered for sale? _____ If not, please explain _____

Are you selling any canned/ processed food items?

Are you selling any meat products? _____ If yes, where is the meat processed _____

Are you planning on giving samples? _____ If yes, please explain _____

Are you a member of Minnesota Grown? _____ If yes, # _____

Are you a registered Farmers Market Nutrition Program Vendor?

Are your items certified organic? _____ If yes, please provide a copy of your National Organic Standard certificate as provided by a USDA accredited agent.

Do you currently hold food related licenses? _____ If yes, please provide a copies with this application.

Vehicle / trailer (including length) description _____

ATTENDANCE (please check all dates you plan to attend during the 2017 season):

ALL DATES	May 26	June 23	July 21	August 18	Sept 15
	June 2	June 30	July 28	August 25	Sept 22
	June 9	July 7	August 4	Sept 1	Sept.29
	June 16	July 14	August 11	Sept 8	

Please indicate all the products you would like to sell at the farmers market during the 2017 season:

VEGETABLES

asparagus	onions	beans	peas	broccoli	peppers	cabbage
potato	carrots	pumpkin	cauliflower	spinach	lettuce	kohlrabi
corn	squash	cucumber	tomato	eggplant	zucchini	garlic
other _____						

FRUITS

apples	blueberries	currants	elderberries	gooseberries
grapes	melons	pears	plums	apricots
other _____				

SPECIALTY PRODUCTS

baked goods	gluten-free bread	flours and grains	jams, jellies	eggs	pickles
honey	maple syrup	whole grains/flours	Mexican specialties		dairy
pies, cheesecakes	dry crepe mix	ice cream	Meat	_____	
other _____					

NON-FOOD PRODUCTS

annual plants	cut, fresh flowers	cut, dried flowers	gourds	jewelry
berry/grape plants	perennial plants	vegetable starts	crafts (specify)	_____
pottery	woolch	soap/candles	lotion	
other _____				

2017 FEE SCHEDULE:

Annual Membership Fee – annual fee to become a market member.....\$10

Stall Fee - Fee for space in the market. There are a number of options for stall space in the market; full season, half season, and daily rates. The full season rate covers all eighteen (18) market days, a half season covers nine (9) market days which can be any market days you choose, the daily rate can be any days you choose.

Full Season (18 days).....	\$100
Half Season (9 days).....	\$60
Daily (each day).....	\$.10

For those vendors interested in single days but do not have dates selected, please submit only the application fee with your application. Check with the market manager to verify the space is available prior to the dates you wish to attend. Fee will be due before the market commences for that day.

For vendors interested in more than one stall please multiply the stall fee by the number of stalls desired. Every attempt will be made to accommodate additional stall requests. You will be contacted if we cannot offer all the stalls requested.

No refunds for market days cancelled due to inclement weather. Vendor fees are non-refundable after May 26.

Fee Calculation

Application Fee	\$	<u>0</u>
Annual Membership Fee	\$	<u>10</u>
Stall Fee	\$	<u> </u>
Full Season (# of stalls x \$100)		
Half Season (# of stalls x \$60)		
Single Days (# of days x \$10)		

Total Fees \$

*Please make check out to City of Isanti.
Credit cards may be accepted, fees will apply. Call for details.*

ACKNOWLEDGEMENTS

Please initial each item below to signify your understanding and acceptance of the terms of becoming a market member.

I have reviewed a copy of and agree to abide by the Isanti Family Farmers’ Market Rules and Regulations in force for the 2017 season.

I understand that I am responsible for complying with any and all local, state, or federal regulations governing the products that I sell.

I agree that the City of Isanti, City of Isanti Parks, Recreation and Culture Board and the IFFM Market Manager and their respective officers, employees, agents, and consultants are not liable for any injury, theft, or damage to either buyer or seller, or their property, arising out of or pertaining to preparation for or participation in the Isanti Family Farmers’ market; whether such injury, theft or damage occurred prior, during or after the Isanti Family Farmers’ Market, vendor further agrees to indemnify, defend, hold harmless the City of Isanti, City of Isanti Park, Recreation and Culture Board and IFFM Market Manager and their respective officers, employees, agents, and consultants for and against any claims for such injury, theft, or damage.

I understand that it is recommended to carry my own general liability and product liability insurance as the City of Isanti does not provide this coverage.

ATTACHMENTS

Please attach the following items to this application:

Copies of organic certifications, if any.

Copies of any food related licenses, if any.

Completed Minnesota Department of Revenue Form ST19.

Completed application with fee calculation worksheet and check (**made out to City of Isanti**) for fees.

Photo of your booth/product/display to be promoted. Can be emailed to isantiparks@cityofisanti.us

Signature of Primary Seller(s) _____ Date _____

Application is not considered complete until all forms are submitted. Incomplete application may be returned in its entirety to the vendor. Applications received by March 31, 2017 will get first priority in the market. Applicants will be notified of their application status by April 28, 2017.

Mail this application and required attachments to:

**City of Isanti
c/o IFFM Market Manager
Attn: Katie Everett
PO Box 428
Isanti, MN 55040**

Office Use Only

Application Received _____

Application Accepted Rejected _____

Check/MO # _____ Credit Card Cash

Amount paid \$ _____

Member # _____