



Cool Season Market 2020 Vendor Application

Name of Farm/Business: _____

Primary Contact Name: _____ Telephone/cell _____

Address: _____

City: _____ County: _____ State: _____ Zip Code: _____

Email Address: _____ Website Address: _____

Alternate Contact Name: _____ Telephone _____

Emergency Contact Name: _____ Telephone _____

Vendor Category (Check all that apply)

Farmer (100% grower)

Farmer with locally purchased supplement. (Grows minimum of 80% of products for sale)

Fruits Plants Baked Goods Meat/Seafood/Poultry

Artisan (Please explain) _____

Other (Please explain) _____

Farmer/Grower Category (Check all that apply – terms defined in Market Guidelines)

Certified Organic Naturally Grown / Raised Conventionally Grown

Other (Please explain) _____

Products to be sold

Please list all products sold and their sources (own farm, purchased from local farm, handmade)

Attach additional sheets if necessary.

If you are applying to sell handmade artisanal items or prepared foods/goods, please attach 2 - 4 photos of items to be sold.



Main Street Calumet, Inc
Cool Season Market
2020 Vendor Application

Please write a brief description of your business so that we may have verbiage to use for marketing materials as well as any social media including Facebook, Twitter, Instagram and our website:

Note about Licenses, Sales Tax and Insurance:

It is the responsibility of all market vendors to pay MI sales tax on applicable items. Main Street Calumet also recommends applying for all applicable licenses and inspection numbers required for the operation of your business and/or sale of your products, and any other license, registration, certification, or permit required by local, state, or federal law. Vendors are also responsible for carrying their own insurance policies as recommended by the vendor's insurance agent. Main Street is not responsible for insuring market vendors.

Cottage Food Laws:

If operating under the Cottage Food Law, then it is the responsibility of the vendor to review and abide by all labeling and ingredient rules as outlined. For more details, please visit the following website.

http://www.michigan.gov/mdard/0,4610,7-125-50772_45851-240577--,00.html

Please Initial that you have read and understand the above statement _____



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2020 Season Schedule

Please indicate if you plan on attending as a full season vendor or a daily vendor. If you are a daily vendor, please circle the dates you plan on attending. Daily vendor payment is due the day of each market, at \$12.00 per day. Full season vendors will pay in advance of the first market, \$100.00 via the Main Street website or by mailing a check to Main Street at the address listed below.

Oct 17	Nov 14	Dec 12
Oct 24	Nov 21	Dec 19
Oct 31	Nov 28	
Nov 7	Dec 5	

Seasonal full time vendors will have 1 tent, 1 table and 2 chairs.

Daily vendors will be provided 1 tent, 1 table, 2 chairs based on availability.

Both to be determined by first come, first served.

Access to electricity is limited. Please bring at least 50' of power cord and a power strip for your use. If you need electricity please fill out the following chart and we will let you know if we can accommodate your needs.

Please complete the chart below so we can plan for electrical needs during the market.

Amps x Volts = Watts

_____ x _____ = _____



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Approved applicants will receive notification of acceptance to the market by the Market Manager via your preferred form of communication. If you are applying as a Full Season vendor, once accepted to the market, kindly pay your vendor fee. Full Season vendor fees are due PRIOR to the first market on October 17th.

Please notify me of acceptance via;

Phone: _____

Text:(Cell)_____

Email:_____

Application Submission Checklist

- Completed Application
- Photos of Items to be sold (prepared foods / artisanal goods)
- Signed Vendor Agreement
- Initials on page 2 of application regarding licenses and insurance

Please email completed application, signed agreement and photos to marketmanager@mainstreetcalumet.com

Or mail to:
Main Street Calumet
P.O. Box 188
Calumet, MI 49913



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VENDOR POLICY AGREEMENT

I have read and agree to follow all of the policies outlined in the Main Street Calumet Farmers Market Rules and Guidelines document.

I understand that if the Market Manager observes or receives evidence of my failure to abide by this agreement, the offense may affect my ability to participate in the market.

I understand that it is my responsibility to inform my family and employees of these policies before they sell at the market on behalf of my business.

INDEMNIFICATION AGREEMENT

To the fullest extent permitted by law, I agree to defend, pay on behalf of, indemnify, and hold harmless Main Street Calumet, its appointed officials, employees and volunteers, and others working on behalf of the Main Street Calumet any and all claims, demands, suits, or loss, including all costs and attorney fees connected therewith, and for any damages which may be asserted, claimed, or recovered against or from the Main Street Calumet, its appointed officials, employees, volunteers, or others working on behalf of the Main Street Calumet, by reason of personal injury, including bodily injury or death and/or property damage, including loss of use thereof, which arises out of or in any way connected or associated with my participation in the Main Street Calumet Farmers Market.

This document releases liability, results in assumption of risk, provides for indemnification, and holds harmless the Main Street Calumet by vendor participant. Please read carefully before signing.

Please sign and return along with all items listed on page 4 of the Application Submission Checklist.

Vendor Name (Please Print) _____

Vendor Signature _____