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2024 Warrensburg Farmers' Market Application Form

125C North Holden Warrensburg, MO 64093 660-429-3988



Name	
	garden/ farm/ production area:
Cell Phone:	Business Phone:
Email Address:	
Have you been part of the Warrensbu	rg Farmers' Market in the past? Circle: Yes/No
What items are you selling at the Fa	armers' Market?
(all items must be listed and approved	d 2 weeks prior to selling at the Farmers' Market)
Percentage of the items you will be s	celling at the Farmers' Market
	classification at 60% or more to sell at the Warrensburg Farmers' Market.
	selling approved products prepared in a non-regulated, non-inspected kitchen
Artisan: Raw artist that hand	
Local Grower: Registered g	rowers with locally grown products being produced by them on their farm
Food Truck: Limited Vend	or Space Available with preference given to Farm to Table establishments.
Facebook:	Instagram:
Website:	
	Information on our WFMP page(s) your
Social Media (Yes or No) /Website (Yes or No) /Email (Yes or No) /Phone Number: (Yes or No)/ Address: (Yes/No)
Are you taking pre-orders? (Yes / N	No)
What are the forms of payment tha	t you receive? (Circle all that apply)
Cash/ Credit/ Checks/ Other:	

Emergency Contact Name: _____ Phone Number: _____

(Initial) I have received the 2024 Farmers' Market Operating Regulations and agree to abide by the regulations. In particular, I agree that I will sell no product that I have not grown or made myself. I understand that space size and location are determined at each market by the market manager.

Business Name

Print Name _____ Signature _____

Farmers' Market Rates

ALL APPLICATIONS MUST BE RECEIVED BY

JUNE 30, 2024 TO BE CONSIDERED A SEASON VENDOR

(All spaces are 10ft x 15ft)

\$30 - 1 day market (NO Vehicle allotted)

\$150 - Prepared Products Vendor/ Artisan Vendor/ Food Truck / Local Grower

\$200 -Local Grower Vendors (2 SPACES)

x \$10 - Annual Vendor Shirt / Size(s):

TOTAL DUE: \$

I would like to request electricity for the 2024 Season.

• Please return completed application, with any applicable fee and or certificates to Warrensburg Main Street. Make checks payable to "Warrensburg Main Street."

• (Internal Office Use)

	• §	Received (Cash/ Online/ Check#) Accepted	Not Accepted
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Date Received:_____