



2026 Warrensburg Farmers' Market Application Form

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



Name _____

Business Name _____

Business Address: _____

Please write driving direction to your garden/ farm/ production area: _____

Cell Phone: _____

Business Phone: _____

Email Address: _____

Facebook: _____ Instagram: _____

Website: _____

Emergency Contact Name: _____ Phone Number: _____

What is your Vendor Type?

See Operating Regulations for descriptions.

____ Season Vendor ____ One Day Vendor

What is your Vendor Category? (Select all that apply)

See Operating Regulations for descriptions.

____ Non-Profit/Community Group Vendor ____ Young Entrepreneur ____ Artisan

____ Food Truck ____ Grower/Produce ____ Prepared Products

What is your Vendor Classification?

See Operating Regulations for descriptions.

REMINDER: You must have ONE classification at 60% or more to sell at the Warrensburg Farmers' Market.

____% Grower/Produce: Registered growers with locally grown products being produced by them on their farm

____% Prepared Products: Vendors selling approved products prepared in a non-regulated, non-inspected kitchen

____% Artisan: Artist that hand makes all products

____% Food Truck: Limited Vendor space available, with preference given to Farm to Table establishments.

What items are you selling at the Farmers' Market?

All items must be listed and approved 2 weeks prior to selling at the Farmers' Market. The Market Manager may reach out for photos of hand made products.

_____ (Initial) I have received the 2026 Farmers' Market Operating Regulations and agree to abide by the rules and regulations.

Business Name _____

Print Name _____ Signature _____

Farmers' Market Rates

**ALL APPLICATIONS MUST BE RECEIVED BY
JULY 15TH, 2026 TO BE CONSIDERED A SEASON VENDOR**

(All spaces are 10ft x 15ft)

_____ **\$150 Grower Vendor/ Prepared Products Vendor/ Artisan Vendor/ Food Truck**

_____ **\$200 Grower Vendors/ Food Truck, 2 SPACES**

_____ **\$50 Young Entrepreneur Vendor**

_____ **\$15 Non-Profit/Community Group**

_____ **\$30 One Day Vendor**

TOTAL DUE: \$ _____ I would like to request electricity for the 2026 Season.

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- Please return completed application, with any applicable photos, 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
 - Date Received: _____
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