



# OCEAN PINES FARMERS MARKET

## Vendor Application/Renewal 2017-2018

Type of Applications:  New  Renewal

Business/Farm: \_\_\_\_\_ Contact: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

Facebook: \_\_\_\_\_ Twitter: \_\_\_\_\_

Type of market stand: *(Check one box)*

- |   |                                       |   |  |
|---|---------------------------------------|---|--|
| <input type="checkbox"/> Farm/Greengrocer                               | <input type="checkbox"/> Bakery       | <input type="checkbox"/> Coffee and Teas          | <input type="checkbox"/> Artist              |
| <input type="checkbox"/> Orchard  | <input type="checkbox"/> Baker, Home  | <input type="checkbox"/> Gardening, Potted Plants | <input type="checkbox"/> Crafter             |
| <input type="checkbox"/> Dairy  | <input type="checkbox"/> Confections  | <input type="checkbox"/> Floral, Cut/Arranged     | <input type="checkbox"/> Giftware, resale    |
| <input type="checkbox"/> Meats  | <input type="checkbox"/> Winery       | <input type="checkbox"/> Direct Sales             | <input type="checkbox"/> Sewn/Embroidery     |
| <input type="checkbox"/> Seafood  | <input type="checkbox"/> Brewery      | <input type="checkbox"/> Professional Services    | <input type="checkbox"/> Apparel/Accessories |
| <input type="checkbox"/> Gourmet Foods                                  | <input type="checkbox"/> Poultry/Eggs | <input type="checkbox"/> Personal Services        | <input type="checkbox"/> Jewelry             |
| <input type="checkbox"/> Other: <i>(If other, please explain)</i> _____ |                                       |   |  |

The products sold at your market stand are:

- |   |   |   |                                       |
|---|---|---|---------------------------------------|
| <input type="checkbox"/> Handmade by me | <input type="checkbox"/> Locally Produced | <input type="checkbox"/> Recycled                 | <input type="checkbox"/> Manufactured |
| <input type="checkbox"/> Handmade       | <input type="checkbox"/> Delmarva made    | <input type="checkbox"/> Provided by me (service) | <input type="checkbox"/> Other        |

Please provide a full description of the goods and/or services available for sale at your Market Stand:

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Your market stand will be staffed by:  Me  My staff and me  My staff

Do you currently participate in any other markets?  No  Yes

If yes, please provide details: \_\_\_\_\_

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# OCEAN PINES FARMERS MARKET

## Vendor Application/Renewal 2017-2018

Year business started: \_\_\_\_\_

Federal EIN#: \_\_\_\_\_

SPECIAL REQUESTS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

We have attached copies of all of our licenses and/or certificates **required** by local/state agencies to sell our products at a Maryland Farmers Market

Additional requests: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### VENDOR RATES FOR SATURDAY MARKET:

#### SPRING & SUMMER: 03/04/2017 – 08/26/2017

- Market \$250
- Market Weekly Drop-In \$25

#### FALL & WINTER: 09/02/2017 – 02/24/2018

- Market \$100
- Market Weekly Drop-In \$25

#### YEAR-ROUND:

- Market \$300

Amount Enclosed: \$ \_\_\_\_\_

- I agree to abide by the terms and conditions of the Ocean Pines Farmers Market.
- I understand that vendor fees must be paid on time. Once paid the fees are non-refundable.
- I am aware that the Ocean Pines Farmers Markets may photograph and/or film to promote the market. Should my application be successful, I grant permission for the Ocean Pines Farmers Market to use any image of my market stand, myself and my staff for this purpose.

Payment:  Cash  Check Enclosed (Make payable to Ocean Pines Association)

Credit Card      

Acct #: \_\_\_\_\_ Exp. (mo/yr): \_\_\_\_\_

Name on card: \_\_\_\_\_ CVV (3-digit code on back): \_\_\_\_\_

All vendor applications submitted to the Ocean Pines Farmers Market are subject to review by the market's management. The market management reserves the right to decline or reject an application without reason. Vendor applications may be declined based on the available openings in a particular vendor category. Declined applications are held on file by the market for one year. If a vendor opening should become available, the market will again review the held applications and may or may not select a new vendor from the held applications.

Signature / Date

Printed Name

Please submit your application along with payment to: **Ocean Pines Association,**  
Attn: **Denise Sawyer, 239 Ocean Parkway, Ocean Pines, MD 21811** or fax to 410.641.8413 or  
hand-deliver to Market Manager, David Bean (410.251.6383 / [flavordrizzles@gmail.com](mailto:flavordrizzles@gmail.com)) at the Ocean Pines Farmers Market