



2019 NON PROFIT VENDOR FARMERS' MARKET APPLICATION

Town of Pelham,
Recreation, Culture & Wellness

Jodi Hendriks
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Fonthill, ON L0S 1E0

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Name: _____ Organization Name: _____

Address: _____ PO Box: _____ City/Town: _____

Postal Code: _____ Phone #: _____ Email Address: _____

Products You'll Be Selling: _____

Promotional Items You'll Be Bringing: _____
(e.g. flyers, balloons, mascot etc...)

Please fill out appropriate choice by placing a in the box provided. As noted, it is FREE of charge for your organization to join us for the day. The Pelham Farmers' Market runs each Thursday, from May to October, between 4:30 p.m. and 8:30 p.m. Non Profit groups will be limited to 1 (one) time per month. Empty spaces will be distributed at the discretion of the Committee. Nonprofit booths are offered on an as available basis, no guarantee of booth space. These dates offered are on a first come, first serve basis.

Choose from the following:

| May | | | | | June | | | | July | | | | August | | | | | September | | | | October | |
|-----|---|----|----|----|------|----|----|----|------|----|----|----|--------|---|----|----|----|-----------|----|----|----|---------|----|
| 2 | 9 | 16 | 23 | 30 | 6 | 13 | 20 | 27 | 4 | 11 | 18 | 25 | 1 | 8 | 15 | 22 | 29 | 5 | 12 | 19 | 26 | 3 | 10 |
| | | | | | | | | | | | | | | | | | | | | | | | |

I/We acknowledge and I/we shall be responsible for our actions of all those allowed or invited to the facility while we are entitled to use it, and I/we hereby release the Town of Pelham, its agents and employees from all manner of action, causes of action, suits, losses, damages, or injuries caused by negligence or otherwise, (whether brought by me/us or any other person) arising out of my use of the facility. I/we also hereby indemnify the said Town, its employees or agents for any losses or damages sustained by me/us or any other person as a result of such actions or proceedings being commenced against them by myself/ourselves or any other such person.

NOTE: Each vendor is required to have a sign stating their name and address on the front of their stall. I have read, understand additional insured and agree to abide by and be subject to the Pelham Farmers' Market Policies and Procedures.

Signature: _____ Date: _____

**Please note: Set up time is between 3:00 p.m. and 4:00 p.m.
For safety reasons NO vehicles shall enter the Pelham Farmers' Market after 4:00p.m.,
or leave prior to 8:30 p.m.**