

# Jackson Township

## 2016 Farmers' Market Vendor Application

Farm/ Business Name: \_\_\_\_\_

Owner(s) Contact Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

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

What type of vehicle will be parked at your space? (car, van, box truck, trailer) \_\_\_\_\_

Do you accept a senior discount or WIC program vouchers? \_\_\_\_\_

**Type of Product(s) Being Sold:**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Fresh unprocessed fruits or vegetables      | <input type="checkbox"/> Herbs                        | <input type="checkbox"/> Baked Goods(specify)_____         |
| <input type="checkbox"/> Maple syrup, sorghum, or honey              | <input type="checkbox"/> Plants/Flowers               | Our business is a:   |
| <input type="checkbox"/> Preserves, pickles, relishes, jams, jellies | <input type="checkbox"/> Frozen meat, poultry or fish | <input type="checkbox"/> Licensed Commercial Bakery        |
| <input type="checkbox"/> Eggs or food items requiring refrigeration  | <input type="checkbox"/> Other_____                   | <input type="checkbox"/> Licensed Home Bakery              |
|  |   | <input type="checkbox"/> Cottage Food Production Operation |

The vendor fee is a \$25 annual registration fee and \$15 per space per weekly market. A second space is \$5 per space per weekly market. Fees are payable at the time application is made. Make checks payable to Jackson Township. Vendor fees are non-refundable. A permit will be mailed to you.

Please check below the date(s) you will sell at the Market.

<input type="checkbox"/> June 9	<input type="checkbox"/> July 7	<input type="checkbox"/> August 4	<input type="checkbox"/> September 1	<input type="checkbox"/> September 29
<input type="checkbox"/> June 16	<input type="checkbox"/> July 14	<input type="checkbox"/> August 11	<input type="checkbox"/> September 8	<input type="checkbox"/> October 6
<input type="checkbox"/> June 23	<input type="checkbox"/> July 21	<input type="checkbox"/> August 18	<input type="checkbox"/> September 15	
<input type="checkbox"/> June 30	<input type="checkbox"/> July 28	<input type="checkbox"/> August 25	<input type="checkbox"/> September 22	<input type="checkbox"/> <b>ALL</b>

Registration Fee: \$ 25.00

\$15 for 1 space x No. of Markets \_\_\_\_\_ =\$ \_\_\_\_\_

\$20 for 2 spaces x No. of Markets \_\_\_\_\_ =\$ \_\_\_\_\_

Total =\$ \_\_\_\_\_

I, with the intention of binding myself, my spouse, my heirs, my legal representatives and my assigns, voluntarily, knowingly and expressly release of the Board of Trustees of Jackson Township, Stark County, Ohio or any member or employee thereof from all claims, demands, actions, judgments and executions that I now have or may have or that anyone claiming through me may have or claim to have against the Board of Trustees of Jackson Township, Stark County, Ohio or any member or employee thereof, created by or arising from my participation in the Farmers' Market offered in the Jackson Township Parks.

I have read and understand the rules and regulations for Jackson Township Farmers' Market.

Applicant:

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Return application and payment to Jackson Township Farmers' Market  
5735 Wales Ave. N.W. Massillon, Ohio 44646**