

2016 Hudsonville Farmers/Crafters Market Application Form

Name: _____

Business name (if applicable): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Annual Vendor Space: YES NO

Number of Spaces (3 max) _____ Cost: \$ _____ Total: \$ _____

If daily, please specify the dates desired: _____

Product(s) that I grow or make & will be selling: _____

Product(s) that I do not grow or make & will be selling: _____

The Farmers Market is from June 1 to October 5, (19 weeks). The cost per space is \$10 daily, \$175 annually.

The Crafters Market is from June 1 to October 5, (19 weeks). The cost per space is \$6 daily, \$100 annually.

The undersigned, all my representatives and I agree to abide by the Rules, which I have reviewed.

Vendor Signature: _____

Date _____

(Return completed form to: Farmers Co-Op, P.O. Box 219, Hudsonville, MI 49426)

FOR OFFICE USE ONLY

Paid _____

Space Number _____

Date _____