

## 2010 -2011 Columbus Winter Farmers' Market Application



Name \_\_\_\_\_  
 Business Name \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ County \_\_\_\_\_  
 State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_  
 E-mail address \_\_\_\_\_ Website URL \_\_\_\_\_  
 Directions to your farm \_\_\_\_\_  
 \_\_\_\_\_

Describe your business and list products you wish to sell **be specific**:

\_\_\_\_\_  
 \_\_\_\_\_

**Insurance Company** \_\_\_\_\_ **Policy number** \_\_\_\_\_

**Columbus Winter Farmers' Market** Space 8x8 is \$300.00 fees **must be paid by Sept. 25, 2010**. Space is limited. **You must have all paperwork, completed application and fees paid & turned in 2 weeks prior to participating in the market. We appreciate your cooperation with this.**

**Market is held at Clintonville Woman's Club 3951 N High Street, Columbus, Ohio 43214**

Dates plan to participate in the Columbus Winter Farmers' Market limited electric available

Nov. 6, 2009\_\_ December 4, 2009\_\_ Jan 8, 2010 \_\_ Feb 12 \_\_ March 5 \_\_

Nov. 13, 2009\_\_ December 18, 2009\_\_ Jan 22, 2010 \_\_ Feb 26\_\_ March 19 \_\_

**Space fees**

Space at the market November 6<sup>th</sup>, through March 19<sup>th</sup> choose 1 of the 3 options listed below:

- \_\_\_\_\_ 1. \$300.00 if paid by Sept. 25, 2010 for all 10 markets.
- \_\_\_\_\_ 2. \$330.00 after Sept. 25, 2010 for all 10 markets all fees.
- \_\_\_\_\_ 3. Pay \$40.00 daily rate must be paid 2 weeks prior to first market dates you intend to do.
- \_\_\_\_\_ Electrical fee \$5.00 per day **electric is limited and on first come basis**

Mail this signed application form, and **your check made payable to Cathy Krist**, a copy of your insurance and map to your farm and mail to: 1970 Marion Marysville Rd., Marion, Ohio 43302.

By signing below I certify that the items I am selling at the Columbus Winter Farmers' Market have been produced, grown, made, or manufactured by myself and or my immediate family. I give permission to the Columbus Winter Farmers' Market directors or its representatives to one or more inspections to verify the items listed above. I agree to comply with the Columbus Winter Farmers' Market rules, regulations & guidelines, and I agree to comply with all local, state & federal guidelines, licenses, & certifications. Once application is approved, fees are non-refundable.

Signed \_\_\_\_\_ Date \_\_\_\_\_

**Space Fee all 10 Winter Markets**     \$ \_\_\_\_\_  
**Space Fee Daily**                             \$ \_\_\_\_\_  
**Electric Fee Daily**                            \$ \_\_\_\_\_  
**Total Paid**                                     \$ \_\_\_\_\_

**Office use only:** Date payment received \_\_\_\_\_ Check # \_\_\_\_\_ Paid through \_\_\_\_\_  
 Inspection date \_\_\_\_\_ Approved \_\_\_\_\_ Denied \_\_\_\_\_ Reason \_\_\_\_\_