



Summer Farmers Market 2014

Market Director: Beverly Ferrante

Sponsored by E.D.V.I.S. {East Derry Village Improvement Society}

52 East Derry Road, East Derry, NH 03041

Phone: 603-434-8974 bevferrante@yahoo.com

www.facebook.com/derryfarmersmarket

www.uppervillagehall.com



Located at Upper Village Hall 52 East Derry Road, Derry, NH

Wednesday from 3:00pm - 6:00pm

Beginning June 18th through September 24th

Summer Membership Fee: \$30.00 per season, per vendor – **MUST BE INCLUDED WITH APPLICATION**

Reserved Rate {minimum of 12 week commitment}: \$15.00

Weekly Vendor Rate {minimum of 4 markets must be paid in full}: \$25.00 per week

Interested vendors must complete the registration form, provide copies of all relevant licenses, provide a certificate of commercial insurance, review and agree with the Market Policies & Guidelines, and pay the seasonal membership fee by **Monday April 21, 2014**.

Incomplete applications will not be accepted. All additional fees must be received no later than **Monday May 19, 2014**.

Please note that all fees are non-refundable. Please see Market Policies & Guidelines for additional information.

Applications are to be mailed to: Attn: EDVIS- Beverly Ferrante, PO Box 131 East Derry Rd, East Derry, NH 03041

Checks made payable to EDVIS

Market Vendor:

Address:

Town: State: Zip Code:

Phone: Cell Phone:

Email:

Primary Contact: On Site Contact:

Number of booths requesting: _____ *Do you require electricity? : Yes No
Please note that spaces with electricity are limited

Circle ALL Dates which you're Paying for and will be Attending

	Fee	June	July	Aug	Sept
Reserved Rate for 12+ weeks: {Paid in Full at time of registration}	\$15.00 per week	18 th	2 nd	6 th	3 rd
Weekly Vendor Rate for 4 -11 weeks: {Paid in Full at time of registration}	\$25.00 per week	25 th	9 th	13 th	10 th
Summer Membership Fee: {Paid in Full at time of registration}	\$30.00 per Vendor		16 th	20 th	17 th
Check #: _____ Total Enclosed:			23 rd	27 th	24 th
Notes:			30 th		

**Please accurately list and describe ALL the items/goods/commodities that you intend on selling at the Derry Farmers Market as well as contact information you'd like available to the public.
All changes to the list below must be brought to the attention and be approved by the Market Director at least 48 hours prior to Market Day (603-434-8974)**

Business Name:
Market Day Representative (Name):
Phone/E-mail/Facebook/etc:
Items you wish to bring:

I acknowledge that I have received a copy of the Derry Farmers' Market policies and procedures, and hereby agree to follow and endorse all regulations, stipulations and food service guidelines as outlined in the procedure manual. I also agree to provide the following at my expense at time of registration:

- **Copies of current and relevant licenses with this completed application**
- **Full Payment of the Summer Membership Fee of \$30.00 by Monday, April 21, 2014**
- **Full Payment for requested market dates due by Monday, May 19, 2014**
- **Food vendors must supply Commercial General Liability in the amount of at least \$1,000,000 per occurrence naming the E.D.V.I.S. PO BOX 131 East Derry, NH 03041 as an additionally insured by Monday, May 19, 2014**
- **IF AN EMPLOYER AND APPLICABLE: Documentation of Workers' Compensation - NH Statutory including Employers Liability- Each Accident/Disease-Policy Limit/Disease-Each Employee \$100,000/\$500,000/\$100,000.**

I hereby accept the terms and conditions as set forth by the Derry Farmers Market and agree to abide by all said policies. In addition, I, the vendor/business participating in the Derry's Farmers Market , to the fullest extent permitted by law, shall protect, indemnify, save, defend and hold harmless E.D.V.I.S., including its officers, officials, volunteers, employees and agents, from and against any and all liabilities, obligations, claims, damages, penalties, causes of action, costs and expenses, including reasonable attorney and paralegal fees, which E.D.V.I.S. and/or its officers, officials, volunteers, employees and agents may become obligated by reason of any accident, bodily injury, personal injury, death of person, or loss of or damage to property, arising indirectly or directly in connection with or under, or as a result of this agreement, but only to the extent caused in whole or in part by any negligent or wrongful act or omission of the vendor and/or its officers, members, directors, volunteers, employees, subcontractors and/or agents.

I also hereby attest that I have read and will abide by the Farmers Market Policies & Procedures.

Participant's Signature

Date