

**Boone County Farmers Market  
VENDOR AGREEMENT**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone (       ) \_\_\_\_\_

Farm Name \_\_\_\_\_

Farm Address \_\_\_\_\_

Farm City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

E-Mail Address \_\_\_\_\_

PRODUCT(S) TO BE SOLD:

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

DETAILED DIRECTIONS TO PRODUCTION AREA(S) - use reverse side, if needed:

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

I, (PRINT NAME) \_\_\_\_\_ and/or my representative(s) selling at the Boone County Farmers Market as (FARM NAME) \_\_\_\_\_ by becoming a seasonal or daily vendor at said market, agree to the terms of ALL the rules, regulations, and by-laws of the Market. I and/or my representative(s) further agree to permit inspection of production area(s) by appointment to assure compliance with the rules, regulations, and by-laws of the Market. I understand that I may have membership/right to sell privileges terminated with NO REFUND of dues or fees should I fail to comply with the rules, regulations, and by-laws of the Market. As a condition of membership/right to self, I and/or my representative(s) agree to release and hold harmless the BOONE COUNTY FARMERS MARKET, its Directors, Officers, Agents, Employees, and Landlords from all claims arising from such membership/right to sell.

Signature \_\_\_\_\_ Date \_\_\_\_\_