

Silverton Farmers Market 2025-2026, Winter Market

COMMUNITY GROUP APPLICATION

303 N Church St., Silverton

October 18, 2025 – May 2, 2026 10 am-12:30 pm

Community Group Name: _____

Name(s) of Representative _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Business Address (if applicable): _____

Daytime Phone: _____ Evening Phone: _____

Email Address: _____ Website: _____

Please list your products/services, etc. in detail. Attach additional sheets if necessary.

There is a chance that not all community groups will be approved in a season. The decision of the Selection Committee is final.

Silverton Farmers Market will host community groups for the two weeks, which are free. Otherwise, your booth fee will be \$25 per week for any additional approved weeks.

Below are the dates for the Summer Market. Please clearly mark the dates you will attend.

October 18	October 25	November 1	November 8	November 15
November 22	November 29	December 6	December 13	December 20
February 7	February 14	February 21	February 28	March 7
March 14	March 21	March 28	April 4	April 11
April 18	April 25	May 2		

**** You must notify the Market Manager of any changes by 5:00 p.m. on the Wednesday prior to the next market date to maintain good standing with our market.***

Insurance: Community groups are covered under our market's insurance policy for the first two weeks of their attendance. Beyond two weeks, groups are ***required*** to list *Silverton Farmers Market* as an additional insurant certificate holder on their insurance policy with the same limits as the market insurance which is \$1,000,000 per occurrence and \$2,000,000 aggregate. **Please attach a copy of insurance to this application if planning to vend longer than the two weeks Silverton Farmers Market will be your host.**

I have read the [SFM 25-26 Winter Market Rules and Guidelines](#) and the [ODA Food Safety at Farmers Markets Information and Guidelines](#) documents, and I agree to abide by them and seek clarification if needed. I authorize Silverton Farmers Market Association to visit my farm/garden/business and those of any consigners to resolve compliance questions. My business name and contact info will be available to customers and will be published on the Silverton Farmers Market website. I understand that I am required to purchase and show proof of insurance, and hold any required licenses. I agree to indemnify and hold harmless Silverton Farmers Market Association and all site owners from and against all liability, claims, losses, damages, and causes of action suits of any nature arising out of or related to my activities at Silverton Farmers Market events.

Signature(s): _____

Date: _____

Return application to:
Silverton Farmers Market, PO Box 288, Silverton, OR 97381
Or email to Silvertonmarket@gmail.com