**Silverton Farmers Market 2025, Summer Season**

**VENDOR APPLICATION**

May 10, 2025 – October 11, 2025

**Farm/Business Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name(s) of Owner(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Farm/Business Address (if different): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Daytime Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Evening Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Website: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please list all products you plan to sell in detail. This list will guide the Vendor Selection Committee in determining the mix of vendors at this year’s Winter Market. Attach additional sheets if necessary.**

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**Please list any/all products you plan to consign for others:**

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*There is a chance that not all vendors or products will be approved in a season. The decision of the Vendor Selection Committee is final.*

**Below are the dates for the Summer Market. Please circle the dates you will attend.**

**May 10 May 17 May 24 May 31 June 7 June 14 June 21 June 28**

**July 5 July 12 July 19 July 26 August 2 August 9 August 16 August 23**

**August 30 Sept. 6 Sept. 13 Sept. 20 September 27 October 4 October 11**

***\* You must notify the Market Manager of any changes by 5:00 p.m. on the Wednesday prior to the next market date, or you will be responsible for paying the booth fee.***

**Insurance:** *Vendors 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.***

**Licenses:** All appropriate licenses are required. You are responsible for bringing copies of your licenses to each market. Some must be posted and the others must be available upon request in order to vend. Please note your current licenses and certifications with expiration dates for each.

***Check all that apply and attach a copy of each.***

**\_\_\_\_\_ Licensed Kitchen (ODA) exp. \_\_\_\_\_\_\_\_\_ \_\_\_\_\_ Commercial Kitchen License exp. \_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_Temporary Restaurant License exp. \_\_\_\_\_\_\_\_\_ \_\_\_\_\_ Egg Handler License exp. \_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_ Organic Certification exp. \_\_\_\_\_\_\_\_ \_\_\_\_\_ Pre-packaged Meat Seller License exp. \_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_ Scale License exp. \_\_\_\_\_\_\_\_ \_\_\_\_\_ Nursery License (cut flowers and plants) exp. \_\_\_\_\_\_\_\_**

**Summer Market Booth Fees:**

# Annual Market Membership Fee ($30/year) $30.00 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Weekly 10’ x 10’ Space Fee ($35.00/week paid one week in advance) $35.00 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Pre-pay for 10 consecutive weeks and get the 11th week free $350.00 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Pre-pay for 20 weeks and get 3 weeks free $700.00 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Total: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\*Make checks payable to Silverton Farmers Market**

I have read the Silverton Farmers 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 Farmer’s Market Association to visit my farm/garden/business and those of any cosigners 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 with $30.00 Association Free and Weekly Fee to:**

**Silverton Farmers Market, PO Box 288, Silverton, OR 97381**

**Or scan and email to** **silvertonmarket@gmail.com**

**S***ilverton Summertime Farmers Market will be held from 9:00 am until 1:00 pm,*

*with set up beginning at 7 am, and tear down beginning at 1 pm*