



Art and Craft Vendor Application

Your Name: _____

Business Name: _____

Address: _____ City: _____ Zip: _____

County: _____ E-mail: _____

Home Phone: _____ FAX: _____

Business Phone: _____ Cell Phone: _____

Which number is best to reach you in case the market is cancelled? _____

Web-site address (if applicable) www. _____

Can we list your farm on www.allenneighborhoodcenter.org? Yes ___ No ___

If we are unable to accept your participation in this season, would you like to be put on our waiting list so that we may contact you when there is an opening?

Yes ___ No ___

Product Description:

All arts and crafts sold at the market must be an individual's creative effort and sold by the Michigan artist or a representative thereof. The sale of items not created by you must be approved by the market manager. Please briefly describe the art or craft item(s) you wish to sell. If you did not make the items yourself, please name the artist or craftsperson:

Please indicate the dates you wish to be considered for participation for the 2008 season. Participation is based on the availability of space as well as on product need and will be confirmed by the Market Manager. Vendors have the option of reserving a spot by completing a reservation agreement with the Market Manager:

Entire Season

- | | | |
|----------------------------------|--------------------------------------|---------------------------------------|
| <input type="checkbox"/> May 21 | <input type="checkbox"/> July 16 | <input type="checkbox"/> September 10 |
| <input type="checkbox"/> May 28 | <input type="checkbox"/> July 23 | <input type="checkbox"/> September 17 |
| <input type="checkbox"/> June 4 | <input type="checkbox"/> July 30 | <input type="checkbox"/> September 24 |
| <input type="checkbox"/> June 11 | <input type="checkbox"/> August 6 | <input type="checkbox"/> October 1 |
| <input type="checkbox"/> June 18 | <input type="checkbox"/> August 13 | <input type="checkbox"/> October 8 |
| <input type="checkbox"/> June 25 | <input type="checkbox"/> August 20 | <input type="checkbox"/> October 15 |
| <input type="checkbox"/> July 2 | <input type="checkbox"/> August 27 | <input type="checkbox"/> October 22 |
| <input type="checkbox"/> July 9 | <input type="checkbox"/> September 3 | <input type="checkbox"/> October 29 |

Waiver of Liability and Statement of Authenticity:

In consideration for participating as a vendor in the Allen Street Farmers Market, I assume all risks of injury suffered while on and/or upon the premises of the market and release and agree not to sue the Allen Neighborhood Center, its employees or anyone connected with the Allen Neighborhood Center of any claim, damages, costs, or cause of action which I have or may in the future have as a result of injuries or damages sustained or incurred while on and/or upon the premises of the Allen neighborhood Center or Allen Street Farmers Market as a farm market vendor.

I, the undersigned, have read the waiver of liability and statement of authenticity as well as the ASFM Farmers Market Policy and both understand and agree to abide by each.

Signed: _____

Printed Name: _____ Date: _____

**Thank you for joining us at the Allen Street Market!
We appreciate your support, and wish you a very positive experience.**