

Land O' Lakes Farmers Market

Vendor Agreement 2014

1. Name, mailing address, telephone number:
2. E-Mail Address:
4. Please list the type/variety of produce and/or crafts you will be selling:
5. If you're selling produce, please tell us *approximately* how much you grow yourself:
(*Nobody's checking and there's no rule; we're just curious for our own records.*)
6. If your items are processed, requiring licensing by the Wisconsin Department of Agriculture, please provide your license number here.

All sellers and shoppers are responsible for their own personal and product liability. THE LAND O' LAKES CHANGER OF COMMERCE, its FARMERS MARKET COMMITTEE, its members and volunteers assume no liability for injuries resulting from the use of the Market or the products sold there.

I have read and understand the above liability waiver. Further, I have read the LAND O' LAKES FARMERS MARKET POLICIES for 2014 and agree to comply with the policies stated within.

Please sign here

Date

Mail this completed form to Pam Boscamp, Farmers Market Committee Chairman, at P. O. Box 684, Land O' Lakes, WI 54540.

Questions? Call Pam at 715-547-3662 or Sandy Wait, director of the Land O' Lakes Chamber of Commerce, at 715-547-3432. Thank you!