**Vegreville Agricultural Society**

**Farmer’s Markets 2024**

**Vendor Application Form**

**Please complete the following:**

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| **Business Name:** |

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| **Name:** |  | | |
| **Address:** |  | **Postal Code:** |  |
| **City:** |  | **Email:** |  |
| **Phone:** |  |  |  |

**Dates available: Thursday Evenings from 4:30pm to 7:30pm set up no later than 4:15 PM**

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| --- | --- |
|  | **June 20** |
|  | **June 27** |
|  | **July 4** |
|  | **July 5-7 Pysanka Festival $25 /day $25/day** |
|  | **July 11** |
|  | **July 25** |
|  | **Aug 1** |

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| --- | --- |
|  | **August 10 Saturday at fair grounds** |
|  | **August 15** |
|  | **August 22** |
|  | **August 29** |
|  | **Sept 7 & 8 Corn Maze** |
|  | **Sept 14 & 15 Corn Maze** |
|  | **Sept 21 & 22 Corn Maze** |
|  | **Nov 16 Christmas craft = $40 per table** |

**Vendors will be required to bring their own chairs, tables & tent.**

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|  | **Pysanka Park $10/ Market** |
|  | **Other Market $\_\_\_\_\_\_\_\_\_as above** |
|  | **Food Safety Certificate (Farmer’ Market) Please provide with application.** |
|  | **Homemade, Grown or produced Product** |

**Market Manager: Rachel Farr & Maryann McAmmond**

**Email:** [**vegrevilleagsociety@gmail.com**](mailto:vegrevilleagsociety@gmail.com)

**Vegreville Ag Society**

**780-632-3950**

**Products, Services or Description**

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**CONTRACT:** I agree to comply with all rules and regulations set out forth in the Vegreville Agricultural Society Farmer’s Markets. I agree to send registration form in advance. Cancellation of booth will be accepted up to one week prior to market date.

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**Signature Date**