Farmers & Fleas Market—Farmersville, Texas
New Vendor Application: NON FOOD

Vendor Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Telephone _____

Telephone (Cell): _____ Email _____

Type of products you will be selling: _____

Will you be using a generator? no_____ yes_____

Texas Sales Tax Permit number_____ (required to be a vendor)

Website address_____ Facebook Page _____(like us on Facebook!)

How did you hear about us? _____

Would you be interested in being a Main Street Program Volunteer? (We'll contact you!) Yes___ No___

The undersigned applies for a sales space at the Farmers & Fleas Market:

MONTH: ___ Number of Field Spaces (15' x 15') @ $10 =_____
___ Number of Field Spaces *with electricity** @ $15 = _____
___Number of Onion Shed spaces (10' x 10') @ $15 = _____
___Number of Onion Shed spaces *with electricity* @ $20 = _____
(Onion Shed spaces may fill up; please reserve early!)

MONTH: ___ Number of Field Spaces (15' x 15') @ $10 =_____
___ Number of Field Spaces *with electricity** @ $15 = _____
___Number of Onion Shed spaces (10' x 10') @ $15 = _____
___Number of Onion Shed spaces *with electricity* @ $20 = _____
(Onion Shed spaces may fill up; please reserve early!)

Make checks to: Farmersville Main Street TOTAL: $_____
NO REFUNDS

*Electricity limited to 20 amps. No electric heaters under Onion Shed.

2018 Market Days:
Jan 6
Feb 3
March 3
April 7
May 5
June 2
July 7
Aug 4
Sept 1
(Oct 6 is Old Time Saturday instead of Market)
Nov 3
Dec 1

If vendor has not checked in by 8:30 AM, the space will be resold

I, the undersigned, certify that the statements made by me in this application are true, complete, and correct to the best of my knowledge and are made by me in good faith. **I agree to abide by the rules and regulations as stated in the "Farmers and Fleas Market Rules & Information".** I understand that any misstatement or omission of material facts in this application may be cause for rejection of this application.

Release of Claims The Applicant agrees to release the City of Farmersville and Farmersville Main Street from all damages and claims of any kind, whether to person or to property which may arise as a result of the Applicant's use of the building. The Applicant agrees to hold the City of Farmersville and Farmersville Main Street harmless from any loss, damage, or injury sustained by the Applicant, any of its agents, employees, invitees, including caterers, and its contractors, patrons, or private property or equipment and to indemnify the City of Farmersville and Farmersville Main Street against any and all claims for such loss, damage, or injury. Neither The City of Farmersville nor Farmersville Main Street assumes any responsibility for any property placed on or in its facilities or grounds. The Applicant also releases and discharges the City of Farmersville and Farmersville Main Street from any and all liability for loss, injury, or damages to persons or property that may be sustained by the use or occupancy of the facility.

_____ _____
Applicant's Signature Date

Return form to: Farmersville Main Street
205 S. Main
Farmersville, TX 75442
972-784-6846 FAX 972-782-6604
www.farmersvilletx.com

Rev 10-17