



Vendor's Application

Business Name: _____ Today's Date: _____

First Name: _____ Last Name: _____ Phone: _____

Address: _____ City: _____ Zip _____

Email Address: _____ Website: _____

Full Time Year Round Vendor _____ Part Time Seasonal Vendor- May through Sept _____

Cost per 10x10 space is \$11.00 per week for Full Time Vendors and \$22.00 per week for our Seasonal Part Time Vendors

Vendor Product Description: Please provide as much detail as possible

*Each vendor /participant is responsible for paying their state sales tax, for having required licenses and permits and for liability insurance on their space in the Market, set-up and product as well as their vehicles that load/unload at the Market. Please have copies of required licenses ready to submit upon acceptance into the Market.

The below-signed vendor is responsible for any family members or employees working in their space, and agrees to indemnify and hold harmless the New Smyrna Farmers' Market, LLC, the City of New Smyrna Beach, Florida, the the property owners; to hold harmless their directors, officers, managers, employees, representatives and agents from and against all liability, claims, demands, damages, levies, and causes of action of every kind and nature arising out of the activities of the vendor at the New Smyrna Farmers' Market, LLC. The vendor also agrees to abide by all Farmers' Market Rules of the New Smyrna Farmers' Market, LLC.

Market rules will be provided upon approval.

Signed _____ Date _____