



# Eagle River Farmers' Market

## 2019 Application

Vendor Name (please print)

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Business Name \_\_\_\_\_

Business Website: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Number of stalls requested \_\_\_\_\_ Electricity needed \_\_\_ yes \_\_\_ no

The products I will offer for sale will include (be specific and include all products):

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Products I sell at the Eagle River Farmers' Market will be grown or produced only at the following location:

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A copy of your proper Wisconsin licensing must be submitted with this contract if selling meat, eggs, or canned goods or any other potentially hazardous foods. A copy of the license must also be available during market hours.

Please include a short promotional note about your business to be used for marketing. Include a photo or copy of your logo if possible.

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Market Days (Circle Selections):                      WEDNESDAYS    SUNDAYS

Booth Payment    Weekly \_\_\_\_\_    Season \_\_\_\_\_

Seasonal payment due on or before first market      (May 15, 2019)  
Weekly payment will be collected on site each week.

**I have read and agree to the terms of the enclosed:  
Eagle River Farmers' Market Policies, Guidelines and Conduct Code.**

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**Signature Required**

**Date**

**Return this signed agreement to:**  
Martha Geiseman, Executive Director Eagle River Main Street Program  
P.O. Box 2302, 525 E. Maple St. Eagle River, WI 54521 (715) 477-0645

Thank you for your interest and support of your local Farmers' Markets.

APPROVED:

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**Market Committee Member**

**Date**

