



Vendor Application

Check all that apply: Plant Sale Fruit/Vegetable Vendor Other

Your Name: _____

Farm or Business Name (if applicable): _____

Address: _____ City: _____ Zip: _____

Phone: _____ Email: _____

Parent/Guardian (if applicable): _____

Phone: _____ Email: _____

Please describe your booth and the products you will offer for sale at the market:

Daily Fee: \$10.00 Per Event (Due by the closing of each event)

NOTE: Any child under the age of 10, must be accompanied by a parent/guardian at all times.

I agree not to hold the Hoschton Downtown Development Authority, its volunteers, the City of Hoschton or its representatives and/or employees responsible for any damages arising out of the sales of my products or from my presence on the Market site. I agree to sell only those items approved by the Market Management as noted.

Vendor Signature: _____ Date _____

Parent/Guardian Signature: _____ Date: _____

_____ *By checking this box, you agree to allow Hoschton's Farmers' Market to use your likeness, name, business, products, etc., on any marketing efforts which is in a direct effort to increase the customer base of the Market.*