

2024 Vendor Application Form

	Vendors Name: Name of Business: Address:			
ARMERS MARKET				
& CRAFTS	City:	State:	Zip:	
Email address:		Home/Cell Phone:		
Products to be sold	l:			
2024 Market Dates	· (Please circle th	e Markets you are attendin	σ)	
	•	,	C)	
-	•	uly 23, August 13, August 27, booth per Market or \$70 for	September 10 and September 24. all 8 Markets	
Non-Profit Organiza	ations Pay no fee			
while on/upon the prelease and agree no agents, servants, ass damage, costs or cardamage sustained or	oremises of the New of to sue the New Er sociations, employee use of action which	Era Christian Reformed Chura Farmers Market, New Era Ges or anyone connected with the I have or may in the future has upon the premises of the New	I assume all risks of injury suffered rich, parking lot or grounds and Christian Reformed Church, its the aforementioned for any claim, ave as a result of injuries or v Era Christian Reformed Church,	
I, the undersigned, hagree to abide by the		r Rules and waiver of liability	y and understand them both and	
Printed Name:		Signature:		
Date:	Total Amo	Total Amount Enclosed \$		
Mail to: NECRC,	Attention: Farmer	r check: Make checks payabers Market, 1820 Ray Avenue nents for your records.	ole to: NECRC- Farmers Market e, New Era, MI 49446	

For more information please contact: Sandy Whitaker, Market Manager shoppnqueen@hotmail.com

517/242-0041

FMvendorapp 2024 Revised 10/24/2023

