



2018 Vendor Registration Form

*Proprietor's Name _____

*Business Name _____

*Email _____

*Address _____

*City _____ State _____ Zip _____

*Phone _____ Cell _____

*EIN: _____

**required information, email not required if the vendor has no e-mail account)*

Products (list all):

Dates Available:

_____	_____
_____	_____
_____	_____
_____	_____

***If more space is needed, please attach sheet with product information.

Primary vending vehicle (i.e. car, truck, 15-passanger van, box truck): _____

Dates of participation:

- _____ All Season (May 6 – Oct 28) 26 weeks
- _____ Early Season (May 6 – June 24) 8 weeks
- _____ Mid Season (July 1 – August 26) 8 weeks
- _____ Late Season (September 2– October 28) 9 weeks
- _____ Specific dates requested: _____

Vendor Space Location Preference:

Returning vendors will be assigned the same location as last season

_____ I request a single booth

_____ I request a double booth

Special requests (i.e. electric, single booth for part season etc):

Volunteer Information:

_____ I would like to help organize a special event

_____ I would like to donate something towards a special event

_____ I would like to lead a demonstration about my product (ex: bee keeping, cooking, soap making, etc.): _____

Other Comments/Suggestions:

I have read all of the rules and agree to them

Signature _____ **Date** _____

Send completed form to: Monona Farmers Market
c/o Claudia Vlisides
4901 Midmoor Rd
Monona, WI 53716

Non-profit organizations and musicians have different application forms that may be found at www.mononafarmersmarket.com.

Monona Farmers Market, Inc. does not discriminate in employment, membership or programs on the basis of sex, race, religion, age, marital status, handicaps, sexual orientation or any other ADA protected categories.