

APPLICATION FOR PERMISSION TO SELL
ELKHART LAKE FARMERS MARKET
 Sponsored by Elkhart Lake Area Chamber of Commerce
 P O Box 425, Elkhart Lake WI 53020
 Phone: 920/876-2922 E-mail: elfarmkt@verizon.net

NAME _____ TELEPHONE _____

ADDRESS _____

CITY, STATE, ZIP _____

LICENSE PLATE # _____

Please provide complete information requested below for all items that you intend to sell in the Market. All items sold in Market should be listed.

VEGETABLE AND SMALL FRUITS

- Asparagus
- Beans
- Beets
- Blackberries
- Bok Choy
- Broccoli
- Brussel Sprouts
- Cabbage
- Cantaloupe
- Carrots
- Cauliflower
- Corn - Sweet
- Corn - Pop
- Eggs
- Honey
- Cucumbers
- Currants
- Eggplant
- Elderberries
- Garlic
- Gooseberries
- Gourds
- Grapes
- Greens
- Herbs
- Huckleberries
- Indian Corn
- Kohlrabi
- Maple Syrup
- Sorghum

- Leeks
- Lettuce
- Mushrooms
- Okra
- Onions - Gr
- Onions
- Peas
- Pea Pods
- Peppers
- Potatoes
- Pumpkins
- Radishes
- Raspberries

- Rhubarb
- Rutabaga
- Spinach
- Soybeans
- Squash
- Strawberries
- Sunflowers
- Tomatoes
- Turnips
- Watercress
- Watermelon

ORCHARD FRUITS

- Apples
- Cherries
- Cranberries
- Nuts
- Pears
- Plums

_____ Other

_____ Other food items

CUT AND/OR DRIED FLOWERS (list types)

PLANTS (list types)

DESCRIPTION AND LOCATION OF GARDEN where produce and flowers are grown:

Questions concerning prepared food items contact: Wisconsin Department of Agriculture 920/795-4693
***NOTICE!!!! A state license is required for those selling processed foods such as dairy products, meat products or bakery.**

AFFIDAVIT

I, _____, agree to sell at the Elkhart Lake Farmers Market only such items as those listed above. I also acknowledge those products will be of my own production and grown on the land described on my application to sell in the Market. I further acknowledge full responsibility for all my activities in the Market (and those assisting me, i.e. family members, partners, etc.) throughout the term of this season. I also understand that I am responsible for my own personal and product liability insurance.

SIGNATURE _____ DATE _____

2008

Spaces: 8' x 8' or 10' x 10' - \$5 Daily fee
Produce sold off of Historical Society's cart - \$5 Daily fee

PLUS \$20.00 ANNUAL APPLICATION FEE

IMPORTANT: Check the dates you plan to attend: JUNE 7 ___ JUNE 14 ___ JUNE 21 ___ JUNE 28 ___
JULY 5 ___ JULY 12 ___ JULY 19 ___ JULY 26 ___ AUG 2 ___ AUG 9 ___ AUG 16 ___ AUG 23 ___
AUG 30 ___ SEPT 6 ___ SEPT 13 ___ SEPT 20 ___ SEPT 27 ___

TOTAL FEE \$ _____ (Calculate your total fee by number of Saturdays you plan to attend plus \$20 application fee)

****Non-profit vendors will receive a free space but are limited to one card table with chairs.**
PRODUCE AND WISCONSIN WEATHER BEING UNPREDICTIBLE, WE ONLY OFFER DAILY FEES.