



## Vendor Application

2019 Season

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Farm Name/Name of Business: \_\_\_\_\_

### Where do you grow/make your products?

**Primary Production Location Address:** \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Best way to reach you on a weekly basis:  Home  Cell  Email  Text

### Type of product (all that apply):

- Produce  Meat &/or Seafood  Plants &/or Flowers
- Value-added  Prepared Food  Crafts/Art  Other

Will you require electricity? Yes/No (Note that we have a limited # of electrical receptacles.)

List items to be sold at the market (if needed, attach another sheet): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Time of year you would like to be at market (months):

\_\_\_\_\_

**Applicant Statement:** I have read and AGREE to abide by the rules and regulations of the Ruston Farmers' Market and to obtain any and all permits and licenses (where applicable), to sell only products produced in my garden/farm or production facility (unless otherwise agreed to), and to be responsible for the quality and safety of what I sell. I further AGREE NOT to hold the Ruston Farmers Market, North Louisiana Farm Fresh, or its representatives and employees responsible for any damages arising out of sales of my products or my presence on the Market site.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

All vendors are subject to a site inspection before becoming an approved vendor. The market manager will contact you to set up an appointment. This application must be **FILLED OUT COMPLETELY** and *accompanied by copies of your appropriate licenses and permits*, an administrative fee of **\$25**, and submitted to the following address:

Ruston Farmers' Market  
P O Box 13231  
Ruston, LA 71270

**Site Visit Performed:**

Coordinator Init: \_\_\_\_\_ Vendor Init: \_\_\_\_\_ Date: \_\_\_\_\_

Please answer the following to help gather data for future grant applications:

What percentage of your farmers' market business is owned and operated on a daily basis by one or more women?

- 50%  
 100%  
 Other \_\_\_\_%

How many owners (those chiefly responsible for day-to-day decisions in your business, include yourself) are involved in your business? \_\_\_\_\_

How many years do each of these owners/operators been in business?

Owner # 1 \_\_\_\_\_ Owner #2 \_\_\_\_\_ Owner #3 \_\_\_\_\_

Primary Owner under 35 years of age.  Yes  No

Market Diversity (From USDA Census of Agriculture):

- Hispanic  Black  American Indian  Asian  
 White  Other \_\_\_\_\_  Prefer Not to Answer

Farm acres cultivated or grazed:

Owned:	
Leased:	
Acres cultivated or grazed in 2018:	

Is there anything you'd like to tell us about your business' needs or about your experience selling at farmers' markets?