

**2009 Turtle Lake Farmers' Market Vendor Application
ARTISANS & CRAFTSMEN SHOW**

Name: _____

Name of others involved: _____

Business Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell phone: _____

E-mail: _____

Vendor License # _____

Describe Merchandise to be sold at the market:

Estimated Dates to Attend: June 20th – July 18th – August 15th – Sept. 19th – October 17th

Vendors will have a 10'x10' Outdoor Space and must supply their own tables. No electric will be provided.

Please Email up to three (3) photos of the merchandise to be sold in JPEG, PNG, or GIF format to asst@turtlelakewi.com – Please call 986-2241 or 986-2505 for more information.

APPLICATION DEADLINE FOR EACH SHOW IS ONE WEEK PRIOR TO THE EVENT

Are you willing to serve on the Board of Directors: _____ Yes _____ No

I understand and agree to hold the Turtle Lake Farmers' Market Association and the Village of Turtle Lake harmless for any and all incidents related to my individual sales and vending display and maintain responsibility to ensure my product's safety at the time of sale. Furthermore, the Market Association and Village are not responsible for theft or damage.

Signature _____ Date: _____

<i>- For Internal Use Only -</i>
ARTISANS & CRAFTSMEN VENDOR FEE _____ \$15.00 per Session
Date Paid: _____
Check # _____
Receipt # _____
Application Approval Date: _____
_____ License Required
_____ License # Verified
License # _____
