Name:			
City:	State:	Zip Code:	County:
Phone:	Cell:	Email:	
for details) A Growe	es in production:  er's Permit must be provide  I \(\sum \) Will provide at marke	ed on or before first ma	may be required- see market rules arket attended.
	cation for right to advertise o accept Senior Farmers M	_	Naturally Grown produce. m (SFMNP) vouchers? ☐ Yes ☐ No
baked goods and for		by the farm. Please atta	pefore they can be sold. Includes ach photos of products, packaging,
***NOTE	: if you intend to sell farm produc	cts <b>AND</b> handcrafted items.	please check <b>BOTH</b> boxes.***
Electrical outlet	needed (Limited availabil	ity. Max load is 5 amp	s. Extension cord NOT provided)
Farm/Business Na	me:		
Farm/Business Add	dress:		
Website address: _			
Facebook page, Ins	stagram, and/or other soc	ial:	
	ke to book your spot at the //EEKLY (Per Event)- \$35		SEASON- \$190/season

Please check the dates that you will be attending during the 2024 season: plan attend the **FULL** 2024 market (7 markets) season I plan to attend weekly:  $\Box$  4/ 26  $\Box$  7/26  $\square$  8/23  $\square$  9/27  $\Box 10/25$  $\Box$  5/24  $\Box$  6/28 Maker's Market is from 4:00pm-8:00pm - Vendor Set-Up Starts at 3:00pm **Add-Ons:** Would you like to rent any additional equipment from us for the Maker's Market? \$20 - Table Rental (3'x6') ■\$35 – Two Tables (3'x6') \$50 - Tent Rental (10'x10') A payment invoice for your booth fees will be sent to your listed email address shortly after we have accepted your application. ALL booth fees must be paid 7 days in advance of the prospective market (for weekly attenders). ALL booth fees must be paid for the whole season 7 days in advance of the starting season (April 19, 2024). Your spot is not fully reserved until we have received payment. Failure to pay invoices may result in removal of the market. Please list/describe ALL farm products, foods or handcrafted items you intend to sell at the market.



Emergency Contact:	Phone:
Secondary Contact:	Phone:

The undersigned hereby acknowledges that he/she has received a copy of and understands the **Piper & Leaf Maker's Market** 2024 Rules and Guidelines, which are attached, and agrees to abide by them. Additionally, the undersigned agrees to be individually and severally responsible to the **Piper & Leaf Makers Market** and/or the **Piper & Leaf Farm Shop** for any loss, personal injury, deaths, and/or any other damage that may occur as a result of the vendor's negligence or that of the vendor's servants, agents or employees. All vendors hereby agree to indemnify and save the **Piper & Leaf Makers Market** and/or the **Piper & Leaf Farm Shop** harmless from any loss, cost, damages and other expenses, including attorney's fees, suffered or incurred by the **Piper & Leaf Makers Market** and/or the **Piper & Leaf Farm Shop** by reason of the vendor's negligence or that of its servants, agents or employees.

Signature:	Date:
By initialing, I understand if accepted to be a v	rendor at the Piper & Leaf Holiday Market, it is mandatory
to provide and maintain a commercial general	liability insurance policy.

## PLEASE SCAN AND EMAIL APPLICATION TO:

Micaila Spellman, P&L Market Coordinator- **MicailaS@piperandleaf.com**Or MAIL APPLICATION TO: Piper & Leaf Farmers Market, 997 Hwy 231,
Lacey's Spring, AL 35754

(No payments by mail, please; you will receive an invoice for payment after your application is accepted)