

Thank you for your interest in returning to the Pineridge Hollow Farmers' Market! Please fill out the application form to ensure we have all of your information correct and up to date. Completed applications will be reviewed by our Farmers' Market team. Payment is not required with your application.

If you are selected, we will contact you with more information about the market and how to submit payment. This application is a fillable PDF, which means you can type the necessary information into the boxes provided, then save the PDF and email your application in to [farmersmarket@pineridgehollow.com](mailto:farmersmarket@pineridgehollow.com). If you are unable to do this you can also print the application and fill it out. You can then scan and email it to us, or mail it to:

PINERIDGE HOLLOW  
Box 274, Oakbank, Manitoba R0E 1J0

Email is the preferred method of submitting applications. If you have any questions or require additional information, please contact Danaka Howden at [farmersmarket@pineridgehollow.com](mailto:farmersmarket@pineridgehollow.com) or 204-541-0142.

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Name	Telephone	
Address		
City/Town	Email	Postal Code
Business Name		
List of products you would like to bring to the market		

### MARKET INFORMATION

MARKET DATES June 15 – September 14 (15 weeks)

- RATES: 1. 10'X10' uncovered space (you provide your own cover) \$35/week  
 2. 8'X10' covered space (we provide the cover) \$45/week  
 3. Electrical \$10/week

### OPTIONS

*Check the options that apply to you. Please check the weeks you are interested in attending (if not the full season).*

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|--|-------------|----|----|----------|
| 1. Full season 10x10 (15 weeks x \$35)               | • JUNE      | 15 | 22 | 29       |
| 2. Individual weeks 10x10 (# of weeks ____ x \$35)   | • JULY      | 6  | 13 | 20 27    |
| 3. Full season 8x10 covered (15 weeks x \$45)        | • AUGUST    | 3  | 10 | 17 24 31 |
| 4. Individual weeks covered (# of weeks ____ x \$45) | • SEPTEMBER | 7  | 14 |          |
| 5. Electrical (# of weeks ____ x \$10)               |             |    |    |          |

*\*If you are a food vendor, you must submit a completed MB Health form with your application.*



PINERIDGE HOLLOW  
EST. 1992

*Farmers' Market*  
2019 APPLICATION FORM

## FEEDBACK

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Please let us know if there were any concerns or questions from last year or if there were certain aspects of the market you enjoyed and would like to keep the same. We would also like to hear any suggestions you have for the upcoming market season.