



2018 Washington Borough Green Team Farmers' Market Registration Form

NAME:

BUSINESS NAME (As you wish it to appear in advertising):

STREET ADDRESS:

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ CELL PHONE: _____

E-MAIL: _____ WEB SITE: _____

NAME AND CELL PHONE # s of STAFF @ Farmers' Market if other than self:

Size/Type of Vehicle:

Referred by:

Will you accept Food Stamps? YES _____ NO _____

Will you accept WIC Coupons? YES _____ NO _____

The Washington Borough Green Team Farmers' Market is intended to include fresh local produce, dairy, meat, & bakery products. Artisans & craftspeople are also welcome.

What products will you be selling?

If you intend on selling prepared food products, the vendor is responsible to complete & submit required forms to the Warren County Health Department.

LOCATION: Route 57, Washington Borough near the Downtown Pocket Park (44 E. Washington Ave., Washington, NJ 07882)

HOURS: Saturdays, 10:00 am to 2:00 pm, June 2-September 22, 2018 (17 week season)

- Vendors are asked to arrive between 9:00 am & 9:30 am and be ready to sell your products to the community by 10:00 am.

VENDOR FEE SCHEDULE PER 10' x 10' SPACE:

Please indicate your selection by circling your chosen vendor option below.

Vendor Options	Dates	# of Weeks	Fees	Payment Schedule
Full Season	June 2-Sept. 22	17	\$200	\$100 deposit due 4/27 \$100 balance due 5/25
Every Other Week	June 2-Sept. 22	9	\$100	\$100 due 4/27
Week to Week	Space permitting		\$20/week	Payable on market day

Any vendor wishing to sell packaged or prepared products, or anything other than fresh produce or plants, is subject to approval from the Warren County Health Department and must submit a Warren County Health Department application. We cannot include any vendors in advertising, nor will vendors be permitted to attend without this approval.

I certify that the goods I sell are locally grown, I comply with all federal, state and local health, safety and labor standards and I have read the accompanying food vendor guidelines provided by the Warren County Health Department. **Initial** _____.

It is hereby understood and agreed by exhibitor that the Washington Business Improvement District management, property owners, business owners, their servants, agents, and employees shall not be liable for losses or injury to persons or property during arrival, departure, or vending period. Vendors/exhibitors waive any rights or claims and further agree to defend and indemnify the WBID from any and all claims of visitors, customers and will provide a certificate of liability insurance naming the Washington Business Improvement District as an additional insured. **Initial** _____.

To reserve your space please provide the following:

- 1) Payment (Please make checks out to Washington BID.)
- 2) Fully completed application
- 3) Certificate of Liability Insurance

The Washington Borough Green Team and the WBID reserve the right to refuse the participation of a vendor or exhibitor.

Signature: _____ **Date:** _____

Please return to: Washington Business Improvement District
Attention: Farmers' Market
21 Belvidere Avenue
Washington, New Jersey 07882
(908) 689-8444 (fax)

For more info: (908) 689-4800
www.washingtonbid.org
admin@washingtonbid.org
<https://www.facebook.com/WashingtonBoroughNJFarmersMarket>



Vendor Waiver of Liability & Indemnification of Washington Borough BID

As a vendor, band, disc jockey, entertainer, performer, stilt walker, horse drawn conveyance operator, ride company/operator, etc. I understand that this waiver of liability must be signed in order for me to participate in the Washington Business Improvement District's (WBID) event. In addition I understand, and acknowledge, that my services will be provided only at the booth/stage site assigned to me (for fixed location vendors) or within the confines of the event's geographic footprint (for roving/moving/mobile vendors) and may consist of some of the following examples of vending services: Art & Crafts sales, Food Vending, Not for Profit Fundraising activities, etc. Vending services covered by this waiver are not limited to the examples listed in the previous sentence, but include any and all vendor services provided in and during the WBID event.

I understand that in order to participate in the WBID event in any way, I must assume all responsibility & risk associated with all conditions, hazards, and potential dangers in, on, above, or about a site or location, whether they are open & obvious or concealed.

I hereby **RELEASE, DISCHARGE, & WAIVE**, any claims, actions or suits of any character, name & description, that I may have and **INDEMNIFY** the Washington Business Improvement District, the event coordinator, and its planning committee, agents, directors, officers & employees and owners/lessees of a booth site, surrounding areas, and retail establishments as a result of any injuries, damages, or death received or sustained by me or passers by in connection with the vendor services performed on, in or while I am participating in the Washington Business Improvement District's event.

I hereby agree to **INDEMNIFY, DEFEND AND HOLD HARMLESS**, The Washington Business Improvement District, the event coordinator, its planning committee, directors, board members, officers, agents and employees and owners/lessees of a booth site, surrounding areas, and retail establishments, from and against any and all liabilities, losses, claims, costs, expenses (including reasonable attorneys fees), damages, obligations, judgements or deficiencies of every/any kind and description, contingent or otherwise, resulting from or arising out of any of my acts or failure to act in connection with my services provided during the Washington Business Improvement District's event identified below.

Vendor Signature

2018 Farmers' Market
Event Name

Date Signed