



2020 VENDOR APPLICATION

Return to: Brittany Gordon, Market Manager
 c/o Twin Parish Port Commission
 P. O. Box 101, Delcambre, LA 70528
 Toll Free: (800) 884-6120 ext. 6
 manager@delcambremarket.org

Farmer/Vendor Information:

First Name: _____ Last Name: _____
 Farm/Business Name: _____
 Address: _____ City: _____ Zip Code: _____
 Phone: Cell: _____ Other: _____
 E-Mail: _____
 Vehicle tag (required): _____

What do you intend to sell at the market? (Please be specific: types of vegetables, types of baked goods, etc.). **ALL** items sold **MUST** be listed. (Attach a separate sheet, if needed) _____

Vendor Agreement:

I AGREE to abide by the Rules and Regulations of the Delcambre Seafood and Farmers Market ("Delcambre Market"), TO OBTAIN, any and all PERMITS and LICENSES (where applicable); TO ASSIST in the inspection of my garden or farm by agents of the Delcambre Market and the La. Cooperative Extension Service; TO SELL only agricultural products from my garden/farm, production facility or harvested on my boat. I FURTHER AGREE to indemnify and save the Twin Parish Port Commission ("Indemitees") from any loss, costs, damages, and other expenses including attorney's fees, suffered or incurred by Indemitees by reason of the vendors' negligence or that of its servants, agents, and employees. I FURTHER AGREE NOT to hold Indemitees or any of their representatives and employees responsible for any damages arising out of the sales of my products or from my presence on the market site. I agree to pay my fees in a timely manner. **I understand all fees are non-refundable once paid and application is accepted.**

Name (Please Print) _____

Signature _____ Date _____

Fees: Each 10'x10' space are as follows:		Annual (9 markets)
Produce only	\$10 per booth per market	\$75
Produce and homemade food:	\$15 per booth per market	\$100
Arts & Crafts:	\$30 per booth per market	\$200

Indicate the market dates your are purchasing:
 •March 7 ____ •April 4 ____ •May 2 (Holiday) ____ •June 6 ____ (No market in July)
 •August 1 ____ •September 5 (Holiday) ____ •October 3 ____ •November 7 ____ •December 5 (Holiday) ____

SIGN UP BEFORE February 28, 2020 for your booth location. Once your application is approved, you will be contacted to select your booth space.

Total amount enclosed: \$ _____ Check/money order made payable to **Twin Parish Port Commission**
 *NOTE: Vendors must provide their own tables, chairs, and tents (where permitted).

FOR OFFICE USE ONLY: Received Check/\$ Order # _____		Date: _____	by: _____
Category:	Sponsor	Farmer	Fisherman
	Value Added	Crafts	Allied/Market Service