

# 2015 Vendor Application and Agreement



Business Name: \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Please Include My:  Business Name  Email  Website on the OFM website 2015 vendor list. .

Primary Contact: \_\_\_\_\_

Other authorized to sell on your behalf: \_\_\_\_\_

Items Sold must be **HOME GROWN or HOMEMADE**. All vendors for prepared food items must attain St. Louis County Health Permit and present a copy to Market Master for days of operation. Here is the website for St. Louis County Health Dept :<http://www.stlouisco.com/healthandwellness/foodandrestaurants>

## TYPES OF ITEMS TO BE SOLD:

Raw Agricultural

For Profit

Value Added Agricultural

Not for Profit

Non-Agricultural

Civic

Prepared Foods

Other \_\_\_\_\_

Specific item descriptions or list: \_\_\_\_\_

\_\_\_\_\_

**Booth Purchase Information:** Vendors may purchase a booth for the entire market season or weekly on a first come, first serve basis. Preferred selling schedule. (payment preferred with application). Make checks payable to Overland Farmers Market.

Season Pass -**\$200**       Double Space Season Pass (for 2 booth spaces)-**\$300**

Daily Pass (paid for in advance or on the day of Market subject to availability)-**\$15**

Indicate dates you plan on attending: \_\_\_\_\_

\_\_\_\_\_

**Signing this application indicates your awareness of and agreement to the Overland Farmers Market guidelines. You are informed and will abide by state regulations regarding sales tax, weights and measures and public health requirements.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please Mail Completed form and fees to: OFM Vendor Committee, P.O. Box 142728, Overland, MO 63114