



2020 Market Application

CONTACT INFORMATION

Vendor's Name: _____ Business Name: _____

Address: _____ County: _____

Phone: _____ E-mail address: _____

Please circle which market/s you would like to participate in:

The Tractor Supply location operates the 1st Friday in May thru the last Friday in September!

Tractor Supply – Tues. 3-6 Friday 3-6

Online Market (operates yearly – participate when you have product)

Online Keyser location

Online Petersburg location

Physical location(s) where products are grown/raised/made:

PRODUCTS AND PRODUCTION

Circle each category in which you plan to bring product to market:

Fruits	Seeds	Lip balm, lotions, soap
Vegetables	Microgreens	Homemade crafts
Meat/Poultry	Baked goods	Homemade clothing
Eggs	Candies/confections	Please list additional items
Jelly/Jam	Dog treats/food	
Fresh/cut flowers	Mushroom	
Plants	Honey/Syrups	

Do you accept: SNAP FMNP(WIC vouchers) SFMNP(Senior vouchers)

Meat vendors: Please provide a list of products you will be selling; beef, pork, poultry, lamb, goat etc. Please provide the name and address of the processor that you use to process and package your meats.

Vegetable and Fruit vendors: Please provide a list of fruits and vegetables that you will be bringing to market.

Egg vendors: Please list the type of eggs (duck, chicken, etc.) and the number of laying hens in your flock.

Bakers: List all types of products that you plan on selling.

Other products: Please make a list and give a brief description of these products.

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*Fees and Payment Schedule Application Fee: (non-refundable per year) \$35.00 for online market. **Due with Application.** Applications can be handed in or mailed (Happy Farmers Market, PO Box 2, Old Fields, WV 26845)*

All CURRENT certifications, permits, and licenses need to be submitted with the application for the application to be processed.

I have received and read the Market Application and Happy Farmers Market (HFM) Market Rules and Regulations. I hereby agree to abide by the HFM Rules and Regulations. I agree to sell at HFM only such items as those listed in the Market Application. I acknowledge those produce, baked goods, and canned foods must be of my own production or produced at the location described in the Market Application in WV, within fifty miles of the markets locations.

I acknowledge full responsibility and liability for all my activities in the Market (and for those assisting me) throughout the year. I acknowledge the authority of the Market Manager and /or the HFM Directors to immediately settle any disputes regarding product legitimacy, procedural and vendor conduct violations, and impose any penalties, including possible suspension or removal from the Market. I agree to allow the Market Manager, directors, representatives of HFM and /or County Extension Agent to inspect, at any time, the premises where the products offered for sale are produced. Failure to allow an inspection will constitute a violation of the Market Rules and Regulation and may result in a suspension or removal from the Market.

I certify that the information contained in this application is true and accurate.

Business Name: _____ Vendor's Name: _____

Signature: _____ Date: _____