

**PAKATAKAN FARMERS' MARKET  
2020 VENDOR REGISTRATION FORM**

Send completed application to P. O. Box 881, Margaretville, NY 12455 or e-mail to  
roundbarnmarket@gmail.com

Vendor's Name \_\_\_\_\_ Date \_\_\_\_\_

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

Address \_\_\_\_\_

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

Phone(H) \_\_\_\_\_ (W) \_\_\_\_\_ Email \_\_\_\_\_

NYS Sales Tax ID# \_\_\_\_\_ County \_\_\_\_\_ Website \_\_\_\_\_

**CHECK ONE: Farmer/Producer ( ) Crafter ( ) Prepared Food ( )**

Membership Fee for all Vendors is \$50.

**Full Season, 22 Weeks, May 16- Oct 10, 2020 Booth is assigned for the season**

**BOOTH RATES:** Per Week: Inside Barn booth 8'x10', \$35. Inside Barn ½ booth, \$25. Pavilion Booth 10x10', \$30. Outdoor Booth 10x10', \$25. Outdoor booth vendor provides own canopy and weights.

**Extended Season, 7 weeks, October 17- November 28, 2020 includes Holiday Market**

Outdoor vendors can arrange with Market Manager for limited inside storage.

Booths applying for : ( ) Indoor ( ) Indoor Half –Size ( ) Outdoor Pavilion ( ) Outdoor

( ) **Need Electricity.** Describe Usage: \_\_\_\_\_

( ) **Need Storage.** Describe Usage: \_\_\_\_\_

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**Please note:** Vendors with large coolers/displays/etc. will be charged an additional fee to cover the use of electricity.

**Insurance:** Vendors must provide market with a certificate of insurance or can purchase insurance through the market at the following rates \$105/season.

# Pakatakan Farmers Market

## Product Specifications

**IMPORTANT** – Please list all products that you would like to sell. See instructions below.

**FARMERS/PRODUCERS:** Please list all products you plan to grow/produce for sale. You do not need to list variety but you do need to be specific as to type. ( example- instead of listing “greens” list lettuce, spinach, etc.) In addition, please list all processed or value-added products you plan to sell. (example: jelly from berries, cider from apples, etc.)

**CRAFTERS:** Please list all craft items you wish to sell which are made by you.

**PREPARED FOOD:** Please list all products you produce for sale and whether or not the food is to take home or eat on site. (Note: You are responsible for complying with any and all Health Department regulations and permits and you must collect sales tax when applicable.)

**BROKERING:** Please list any brokered products that you want to request approval to sell. You must be specific and list all items for consideration. **Brokered products must be labeled clearly as such and if approved, will not be claimed as home grown.**

### LIST ALL PRODUCTS YOU WOULD LIKE TO SELL & CHECK CATEGORY

<u>Products</u>	<u>Grown/Made</u>	<u>Brokered</u>	<u>Approval</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Products**

**Grown/Made**

**Brokered**

**Approval**


**NOTES/COMMENTS**

**Registration Fee ( all vendors )** \$ 50.00 \_\_\_\_\_

**Booth Fees (choose one)**

Discounted fees are to be paid in full by the Annual Vendor Meeting. Weekly booth fee payments are no longer permissible, booth fee payments are to occur once a month, schedule to be provided at the Annual meeting.

\_\_\_ Season Indoor Barn 8’x10’ – 10% Discount \$ 661.00 \_\_\_\_\_

\_\_\_ Season Indoor Barn Half Booth -- 10% Discount \$ 472.00 \_\_\_\_\_

\_\_\_ Season Outdoor Pavilion 10’x10’ Booth--10% Discount \$ 567.00 \_\_\_\_\_

\_\_\_ Season Outdoor 10’x10’ Booth -- 10% Discount \$ 472.00 \_\_\_\_\_

\_\_\_ Weekly Indoor Barn 8’x10’ Booth – 4 Week Deposit \$ 140.00 \_\_\_\_\_

\_\_\_ Weekly Indoor Barn Half Booth – 4 Week Deposit \$ 100.00 \_\_\_\_\_

\_\_\_ Weekly Outdoor Pavilion 10’x10’ Booth – 4 Week Deposit \$ 120.00 \_\_\_\_\_

\_\_\_ Weekly Outdoor 10x10’ Booth – 4 Week Deposit \$ 100.00 \_\_\_\_\_

**Electric Charge -- Season** \$ \_\_\_\_\_

**Insurance Fee – Season** \$ 105.00 \_\_\_\_\_

Donation to Pakatakan Farmers Market \$ \_\_\_\_\_

**TOTAL PAID** \$ \_\_\_\_\_

Accepted payment by check, cash, or paypal,roundbarnmarket@gmail.com. Please note that you are responsible for paying all processing fees from banks or paypal.

**Received** \_\_\_\_\_ **Reviewed** \_\_\_\_\_ **Payment Received** \_\_\_\_\_  
*Initial/Date*

**Market Manager:** Georgi Fairlie

e-mail: georgi.fairlie@hotmail.com

**Round Barn of Halcottsvill, Inc. Board**

Deborah Bauer T: 607 326-3404 e-mail: locustgrovesoap@yahoo.com

Jill Cline T: 845 586-3443 e-mail: jill@catsguild.org

Brian Mulder, Vice President T: 607 287 0208 e-mail: mulder@catkill.net

Lisa Eney Robinson T: 607 746-3504 e-mail: lisa.enity@gmail.com

Dwayne Hill T: 607 652-6792 e-mail: shaverhillfarm@gmail.com

Linda Smith, Treasurer T: 607 829-8852 e-mail: shermanhillcheese@live.com

Madalyn Warren, President T: 607 326-6177 e-mail: madalyn.warren@gmail.com

Tanya Moyer, Secretary T: 518 673 4848 e-mail: mulligancreekacres@live.com

Pakatakan Farmers’ Market

P. O. Box 881, Margaretville, NY 12455 • 845-586-3326 • roundbarnmarket@gmail.com

## VENDOR COMPLIANCE AND INDEMNITY AGREEMENT

I, the undersigned, have read the Rules and Regulations of the Pakatakan Farmers' Market and agree to abide by all these Rules and Regulations.

I further agree to operate my booth in accordance with these rules and to pay all applicable fees as set out in the Rules and Regulations. I do understand that the booth rent, length of season and hours of operation are determined by the market management, and even if I do not agree with them, I will abide by them.

I further understand that failure to comply with the above could mean dismissal from the Market.

As a Vendor at the Pakatakan Farmers' Market, I agree to SAVE, HOLD HARMLESS, and INDEMNIFY the Pakatakan Farmers' Market and The Round Barn of Halcottsville, their members, employees, and associates, from any and all liability or responsibility pertaining to any damages to person or property on the space reserved for me from said market, when such damages, or liability, arise out of any acts of my own, or of my employees or associates, located at said site.

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Vendor Name - Please Print

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Vendor Signature

Date

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Market Manager's Signature

Date