

# Matthews Community Farmers' Market

## New Vendor Application Form 2020 Season

*Thank you for your interest in being a vendor at the Matthews Community Farmers' Market. Please read the accompanying market rules, completely fill out this application form and mail it along with additional information described below. Make sure your packet includes a \$25.00 **non-refundable** fee, in addition to a self-addressed, stamped, business-size envelope so we can send you a reply. Mail by **January 15, 2020 to Paulette Wilkes, Market Manager, Matthews Community Farmers' Market, 6632 Flat Creek Drive, Charlotte NC 28277**. Applications received after this date will not be considered nor retained.*

*You will be notified by mail using the envelope you include regarding acceptance or rejection of your application. Your application will be reviewed by the Board of Directors to determine if your product(s) comply with market rules and how your product(s) fits with the needs of the market. Due to the large volume of applications received each year, farm or business inspection by market representatives will be conducted on the applications the board considers to be the most likely candidates for admission. The board of directors will formally accept or reject applications based on information gathered. Due to early inspection dates, re-inspection of a prospective vendor's farm may be required before the start of market in April. Newly accepted vendors must attend the market's annual membership meeting in March and pay their annual membership fee (make checks payable to the Matthews Community Farmers' Market) at that time. New vendors may begin selling at the first market of the season. Questions? Call the market manager at 704-488-4763.*

### **FARM OR BUSINESS**

Name \_\_\_\_\_

Names of Owners \_\_\_\_\_

Home phone number \_\_\_\_\_ Cell Number \_\_\_\_\_

E-mail \_\_\_\_\_ Farm or business website \_\_\_\_\_

Mailing Address \_\_\_\_\_

Physical Address (if different than above) \_\_\_\_\_

Names of helpers who may assist you at selling at market \_\_\_\_\_

When do you intend to start selling? \_\_\_\_\_ How many weeks do you plan to sell? \_\_\_\_\_

Do you intend to sell every week or on an occasional basis? \_\_\_\_\_

What produce or product(s) do you plan to sell at the market? Describe the produce or product(s) in detail, using a separate sheet of paper if necessary. Provide as many as three photos if possible.

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**IF YOU ARE A GROWER:**

How much area do you have in production?

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How long has the area been under cultivation?

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What water source do you use to wash harvested produce?

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How long have you been gardening or farming?

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Do you farm full-time or part-time? \_\_\_\_\_

Please send one or more photos of your farm or garden in season.

Please explain your growing practices and agricultural or other products used to enhance a) pest management, b) weed control, and c) soil amendments.

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Are your animals pasture-raised? \_\_\_\_\_ Kept indoors? \_\_\_\_\_ Combination? \_\_\_\_\_

Please explain your pasture-based practices:

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Do you use any feed additives or injectables to supplement the animals' normal diet? \_\_\_\_\_

If so, what do you use?

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Do you use any hormones or antibiotics to maintain the animals' health? \_\_\_\_\_ If so, what do you use?

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Are your ruminant animals grass-fed only? \_\_\_\_\_

If grain-fed/finished, how many weeks are they fed grain before slaughter? \_\_\_\_\_

Please describe your nutrition program and health maintenance practices (for ruminants and non-ruminants):

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**CRAFTERS:**

Provide information about the production process and items used to create your products (or they local?)

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**IF YOU ARE A BAKER OR A SPECIALTY CONSUMABLE PRODUCTS MAKER:**

What is your background regarding the production of these products?

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Are you a formally trained chef? \_\_\_\_\_

Where are your products made or processed? At home or in a commercial kitchen?

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***\*\*Please attach a copy of licenses/permits, certifications and inspection forms pertinent to the products you want to sell at the market.\*\****

Do you use locally sourced ingredients in your product? Would you be open to using ingredients purchased from MCFM vendors? \_\_\_\_\_

**FOR ALL APPLICANTS:**

Do you sell at other farmers' markets in the area? \_\_\_\_\_

Which ones and for how long? \_\_\_\_\_

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How do you currently market your products?

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How does the Matthews Community Farmers' Market fit into your marketing plans?

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**Please draw/print off a map with directions to your farm or business on the back of this form.**

Have you ever been convicted of a felony? \_\_\_\_Yes \_\_\_\_No

I acknowledge I have been provided with a copy of the policies and rules governing the operation of the Matthews Community Farmers' Market and I will abide by these market policies and rules. I further agree to allow representatives of the market to visit the premises where the products I intend to sell are produced. I certify the information contained in this application is true and accurate. As a condition of membership, I agree to release and hold harmless the Matthews Community Farmers' Market Inc., its directors, officers and employees from all claims relating to property damage or personal injury to myself, my family members and employees arising from such membership. I assume the sole risk of selling at the market site (188 Trade Street, Matthews, NC.). In addition, I agree to release and hold harmless David Blackley, lessor of the farmers' market site, from all claims relating to property damage or personal injury to myself, my family members and employees related to or arising from my presence on the market site or its parking areas.

Name of Business \_\_\_\_\_ Vendor Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

-----**For market use only**-----

Application received by \_\_\_\_\_ Date \_\_\_\_\_

Site visit made by \_\_\_\_\_ Date \_\_\_\_\_