

# Hillsborough Farmers' Market 2012 Member Renewal Form

Please help us update our records by thoroughly filling out the information below. Please call (919) 360-5254 with any questions.

Farm or Business  
Name \_\_\_\_\_

Address of Farm or Business \_\_\_\_\_

\_\_\_\_\_ County \_\_\_\_\_

Name(s) of owner(s) \_\_\_\_\_

Phone number \_\_\_\_\_ Cell phone number \_\_\_\_\_

E-mail address \_\_\_\_\_

Website URL (if applicable) \_\_\_\_\_

Mailing Address (if different from above) \_\_\_\_\_

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

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

Attending: Saturday Market only \_\_\_\_\_ Wednesday Market only \_\_\_\_\_ Both \_\_\_\_\_

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

In signing and submitting a Membership Renewal form to the HFM, the individual vendor is making a commitment to sell at the market every Saturday and/or Wednesday of the season, with the exception of those Saturdays and/or Wednesdays for which the member vendor has notified the Market Coordinator in advance that he/she will not be participating in the market. **Vendors who only intend to sell for part of the season are welcome, but for planning purposes, they must let the Market Coordinator know in advance when they will not be there. For Saturday Markets, April – October, please notify the Market Coordinator at (919) 360-5254 no later than noon on the Friday before the market if you plan to be absent.**

\_\_\_\_\_ Please check here if you wish to change the products you bring to the market. For example: Perhaps you didn't bring eggs last year but would like to in 2012. Equally, if you brought eggs last year but won't be bringing them in 2012 please check here also. The Leadership Team strives to keep a good balance of product variety at the market. ANY change in your product mix must be approved prior to selling.

Please describe the product change you would like to make. \_\_\_\_\_

\_\_\_\_\_  
**Vendor Category:** Please review categories as described in the Market Guidelines. Indicate approximate percentage of product that you plan to sell in each category. Please give a detailed list **ALL** of the produce or product (s) you plan to sell at the market next to the appropriate category. **(Only the products listed or identified on this form may be sold)**

Farm \_\_\_\_\_ % \_\_\_\_\_

Value –Added Farm \_\_\_\_\_ % \_\_\_\_\_

Craft \_\_\_\_\_ % \_\_\_\_\_

\_\_\_\_\_  
All vendors who will be baking or selling prepared food items are required to have their kitchen or premises inspected by the appropriate agency. If you have an updated inspection or license please include a copy with this form. If you have questions regarding kitchen inspections please call Brenda Hoyle at (919) 606-0280.

Please provide a brief marketing description of your business and its products (This will be included on the HFM website – [www.hillsboroughfarmersmarket.org](http://www.hillsboroughfarmersmarket.org)) \_\_\_\_\_

\_\_\_\_\_  
Please read the 2012 market guidelines provided on the website. Complete this renewal form and mail it along with your \$50 membership fee to **The Hillsborough Farmers Market, P.O. Box 644, Hillsborough, NC 27278**. Checks should be made payable to the Hillsborough Farmers Market. This renewal fee must be paid by January 31, 2012. After January 31st the renewal fee will increase to \$75.

**For the 2012 Market season April – October a weekly fee of \$5.00 will be charged for each Saturday market attended. This fee will be collected on the market day.**

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I acknowledge I have read the 2012 Hillsborough Farmers Market Membership Guidelines and agree to follow the policies and rules listed therein. I further agree to allow representatives of the market to visit the premises where the products I intend to sell are produced if requested.

As a condition of membership, I agree to release and hold harmless the Hillsborough Farmers Market, its directors, officers and volunteers from all claims relating to property damage or personal injury to myself, my family members and employees arising from such membership.

I certify that the information on this application is true. If any of this information is found to be untrue, I forfeit my right to sell at the Hillsborough Farmers Market and any fees I may have paid.

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

Please send your renewal fee of \$50.00 before January 31, 2012 or send your renewal fee of \$75.00 after that date and this completed form to The Hillsborough Farmers Market, P.O. Box 644, Hillsborough, NC 27278

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

Renewal form received by \_\_\_\_\_ Date \_\_\_\_\_

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

Copies of applicable licenses received or on file \_\_\_\_\_ Date \_\_\_\_\_

Change Approval \_\_\_\_\_ Date \_\_\_\_\_