



## 2024 Delafield Farmers' Market Application

Please complete and sign this application, then return to P.O. Box 180232 Delafield, WI 53018 or email scanned PDFs to [Historicdelafieldfarmersmarket@gmail.com](mailto:Historicdelafieldfarmersmarket@gmail.com) with the subject line "Application" .

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

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

Address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Address where produce is grown (if applicable):

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Website URL: \_\_\_\_\_

How would you characterize your vendor category; Please check all that apply.

Produce

Bakery

Flowers/Plants

Hot Food/Cold Food

Art/Crafts

Other \_\_\_\_\_

Please list the specific items to be sold. Vendors will be chosen based upon products sold to ensure a good mix of product offerings.

\_\_\_\_\_

\_\_\_\_\_

The 2024 season runs from May 4th through October 26th. Please mark all dates you plan to attend or check the full season box indicating you plan to attend every week.

May 4

May 11

May 18

May 25

June 1

June 8

June 15

June 22

June 29

July 6

July 13

July 20

- July 27
- Aug 3
- Aug 10
- Aug 17
- Aug 24

- Aug 31
- Sept 7
- Sept 14
- Sept 28
- Oct 5

- Oct 12
- Oct 19
- Oct 26
- Full Season

Number of stalls:\_\_\_\_\_ Single vendor stall is approximately 10'x10'.

Seasonal rate is \$120 per stall.

Daily rate is \$20

Please make checks payable to: Delafield Farmers' Market

Other Requirements: With your application, please include each of the following:

- Applicable licenses
- State of Wisconsin sales permit
- Certificate of insurance
- Completed S-240 form (Section C only)
- Two photos of your products.
- Applications received without these items will not be considered for the market.

Printed Name:\_\_\_\_\_ Signature:\_\_\_\_\_

Date: \_\_\_\_\_