

# Vendor Application for HATTERAS ISLAND FARMERS MARKET 2011

Name of Farm/Business: \_\_\_\_\_

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

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

Mailing Address (if different): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Web Site: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

How did you hear about the Hatteras Island Farmers' Market? \_\_\_\_\_

Would you like to be listed on the Coastal Harvesters, Inc. web site?  Yes  No

One-time Membership Fee (\$25) - NEW MEMBERS ONLY \$ \_\_\_\_\_

Full Season of Markets (\$110) \$ \_\_\_\_\_

Partial Season (\$10 per market) \$ \_\_\_\_\_

TOTAL ENCLOSED \$ \_\_\_\_\_

Check off markets  
you plan to attend

List items you intend to sell at each market

June 21, 2011 \_\_\_\_\_

June 28, 2011 \_\_\_\_\_

July 5, 2011 \_\_\_\_\_

July 12, 2011 \_\_\_\_\_

July 19, 2011 \_\_\_\_\_

July 26, 2011 \_\_\_\_\_

- August 2, 2011 \_\_\_\_\_
- August 9, 2011 \_\_\_\_\_
- August 16, 2011 \_\_\_\_\_
- August 23, 2011 \_\_\_\_\_
- August 30, 2011 \_\_\_\_\_

*All authorized vendors participating in the Hatteras Island Farmers Market shall be individually and severally responsible for any loss, bodily or personal injury, deaths, and/or property damage that may occur as result of the vendor's negligence or that of its servants, agents, and employees. All vendors hereby agree to indemnify and save Coastal Harvesters Inc., its officers and employees harmless from any loss, cost, damages, and other expenses, including attorneys' fees, suffered or incurred by Coastal Harvesters Inc. by reason of the vendor's negligence or that of its servants, agents and employees. No insurance is provided by Coastal Harvesters Inc. to participants in the Hatteras Island Farmers Market. Participating vendors will be expected to purchase their own liability insurance. My signature indicates that I will adhere to the Policy Manual for the Hatteras Island Farmers Market.*

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

QUESTIONS? Call Joanne Throne at 252-996-0679 or send email to [info@coastalharvesters.org](mailto:info@coastalharvesters.org).

Mail this completed form and check payable to **Coastal Harvesters, Inc.** to:  
 Coastal Harvesters, Inc.  
 P.O. Box 906  
 Buxton NC 27920

<b>CHI/HIFM USE ONLY</b> DATE REC'D: _____ CHECK #: _____ AMOUNT: _____
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