

**SAUGERTIES FARMERS MARKET**  
**2024 Indoor Market**  
**Vendor Application Form**

**P.O. Box 164, Saugerties, NY 12477**  
**Carmen Dumont, Market Manager | (415) 297-4840 | carmenmdumont@gmail.com**

Name \_\_\_\_\_ Farm/Business Name \_\_\_\_\_

Check applicable category: Farmer \_\_\_\_\_ Baker \_\_\_\_\_ Food Producer/Prepared Foods \_\_\_\_\_  
Vendor (seller of specialty products not made by you) \_\_\_\_\_ Craft/Art \_\_\_\_\_

Mailing address: Street \_\_\_\_\_

City/Town and ZIP code \_\_\_\_\_

Email address \_\_\_\_\_

Telephone: business \_\_\_\_\_ cell \_\_\_\_\_

**Space selection:**

We have three kinds of vendor spaces:

- Type 1: 8x8' spaces against a wall, with an 8' table and 2 chairs (14 of these); fee is \$30
- Type 2: 6' tables end-to-end in the middle of the room, with 2 chairs (16 of these); fee is \$25
- Type 3: 10x8' corner spaces with two chairs (3 of these); fee is \$35

Need **electricity** (specify # of outlets)? \_\_\_\_\_

**Market dates:** Sundays, 10 a.m. to 2 p.m. Check date(s) and space type that you would like:

<b>Date</b>	<b>Space type (1, 2, or 3)</b>
November 24 – (Thanksgiving) _____	_____
December 22 – (Christmas) _____	_____

**Weather considerations:** In the unlikely case of a serious storm, we may have to cancel a date. A decision will be made no later than the Wednesday before the market date.

**Payment**

After your application is accepted, we will work out arrangements for fee payment.

**Licenses:** You are responsible for conforming to all applicable Federal, State, and local laws that apply to prepared products. Proof of required licenses must be submitted with this application.

**Who will sell at the market?** Name \_\_\_\_\_ Relationship \_\_\_\_\_

Applicant's signature \_\_\_\_\_

Printed name \_\_\_\_\_ Date \_\_\_\_\_



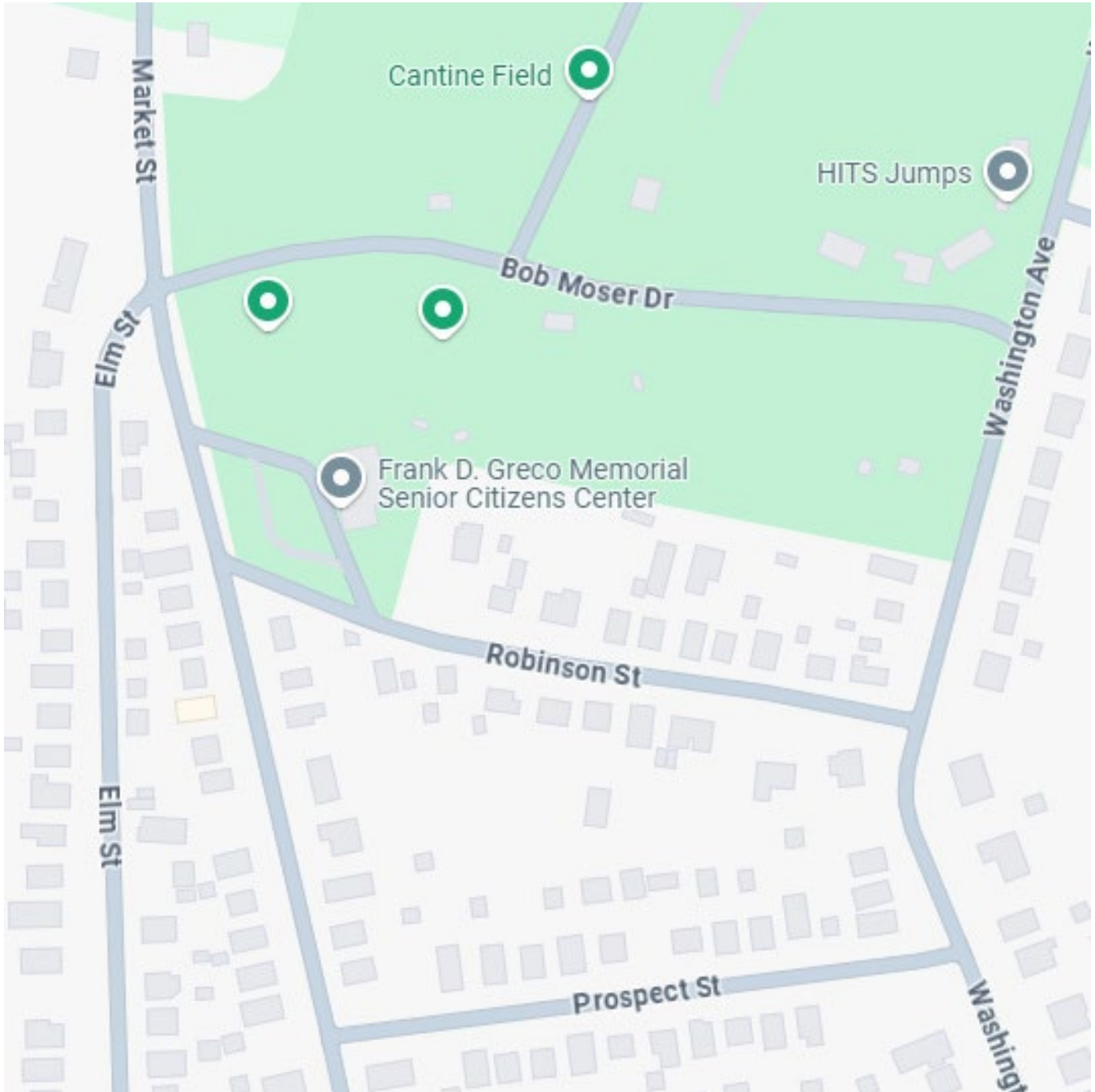
# DIRECTIONS TO THE SAUGERTIES FARMERS MARKET

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## INDOOR LOCATION IN 2024

**Frank Greco Memorial Multi-Purpose Center  
207 Market Street, Saugerties**

This is the **location** for the indoor market; it is NOT the mailing address for the Saugerties Farmers Market, which is PO Box 164, Saugerties, NY 12477.



**VENDOR WAIVER OF LIABILITY  
SAUGERTIES FARMERS MARKET  
2024 INDOOR MARKET**

I, \_\_\_\_\_ (print name)  
representing

\_\_\_\_\_ (print business name) do hereby agree to indemnify and hold harmless the the Saugerties Hudson River Partnership, Inc.; and the Saugerties Farmers Market, and their representatives, employees, and officers, from and against any and all losses arising from or growing out of participation in the Saugerties Farmers Market in the Frank Greco Memorial Center at 207 Market Street in Saugerties, whether it be caused by the negligence of myself, my agents, servants, employees, or otherwise.

I understand that it is a contractual obligation for me to carry liability insurance as a condition of having a space at the Saugerties Farmers Market. I agree to provide the Saugerties Farmers Market with a **Certificate of Liability Insurance evidencing coverage of no less than One Million Dollars (\$1,000,000.00) per occurrence in Combined Single-Limit Bodily Injury, Property Damage insurance, and Completed-Products liability, naming as Specifically Designated Additional Insureds both of the following:**

**Saugerties Hudson River Partnership, Inc. • PO Box 164 • Saugerties, NY 12477  
Saugerties Farmers Market • PO Box 164 • Saugerties, NY 12477**

Signature \_\_\_\_\_

Name (please print) \_\_\_\_\_

Business Name (please print) \_\_\_\_\_

Date \_\_\_\_\_

**Please have your insurance agent mail your ACORD insurance certificate with Specifically Designated Additional Insured Entities to:**

**Saugerties Farmers Market  
PO Box 164  
Saugerties, NY 12477**

or as an email attachment to: [contact@SaugertiesFarmersMarket.com](mailto:contact@SaugertiesFarmersMarket.com)

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