

*St. John's Farmers Market*  
*P. O. Box 523*  
*Tappahannock, Virginia 22560*

VENDORS AGREEMENT

Vendor: \_\_\_\_\_

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

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

Telephone: \_\_\_\_\_ (Home) \_\_\_\_\_ (office)

List of Products To Be Sold:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Farmers and/or vendors who raise or make their own product, produce, fruits, etc. are exempt from having to obtain a business license from the Town of Tappahannock.

The above vendor agrees to:

1. Observe the rules and regulations of the market;
2. Pay non-refundable fee of \$15 each month before Market opens at 8am;
3. Be responsible for safety and purity of all products offered for sale;
4. Comply with all applicable health codes and regulations;
5. Cooperate with the Market Manager;
6. Not sublet or loan his/her space.

I wish to be at St. John s Farmers Market for the month(s) of

\_\_\_\_\_

Vendor Business Name

Vendor Agent

Date

**Rev. April 2004**