



# 2020 Vendor Application

PO Box 1161, Gatlinburg, TN 37738

[www.gatlinburgfamersmarket.com](http://www.gatlinburgfamersmarket.com)

(865) 640-7190

### Market Location:

1222 East Parkway (321), Light 2B

Gatlinburg, TN 37738

(Across from Food City)

## Local Choices for Healthy Mountain Living

### Vendor Information

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

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

Email Address: \_\_\_\_\_ Web Page: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Text: Y \_\_\_ N \_\_\_

How do you prefer to be contacted: Email \_\_\_\_\_ Phone \_\_\_\_\_ Cell \_\_\_\_\_

License Plate #: \_\_\_\_\_ State: \_\_\_\_\_

Do you want your contact information to be available to customers? \_\_\_\_\_ Yes \_\_\_\_\_ No

Do you have a city business license? \_\_\_\_\_ Yes \_\_\_\_\_ No

Do you have a county business license? \_\_\_\_\_ Yes \_\_\_\_\_ No

(Please attach copies of applicable licenses to this application)

Application is for a Edibles Booth for: \_\_\_\_\_ Daily \$5.00 or \_\_\_\_\_ Full Season \$80.00

Application is for a Craft Booth for: \_\_\_\_\_ Daily \$10.00 or \_\_\_\_\_ Full Season \$160.00

Address of your FARM or GARDENING Areas: \_\_\_\_\_

NOTE: Please use other side or attach detailed instructions or a map to your farm or gardening area. Application is incomplete without a map or written directions.

Circle and/or describe any of the following items/products you plan to sell at the Gatlinburg Farmers Market:

1. Vegetables
2. Fresh Fruit
3. Cut Herbs
4. Cut Flowers
5. Tea/Coffee
6. Honey/Maple Syrup
7. Jellies, Jams, Preserves
8. Baked Goods
9. Soaps

For the following items/products you plan to sell please refer to: TN Farmers Markets:  
<https://www.tn.gov/agriculture/consumers/food-safety/ag-farms-farmers-markets.html>  
 Under Program Sources: Click on Farmers Markets\_ State Compliance Guide.

10. Eggs
11. Plants
12. Grains
13. Cheese
14. Milk/Dairy
15. Meat/Fish
16. Canned goods other than #7 above
17. Juice/Cider
18. Topical Health and Wellness Products
19. Hemp

If you circle any category from #10 - #19, you must attach a copy of your CURRENT TENNESSEE STATE CERTIFICATION and a copy of your last inspection. Application is incomplete without these documents and will not be processed. IF YOU CIRCLE ANY CATEGORY FROM #10 - #19, YOU MUST COMPLY WITH STATE REGULATIONS OR YOU WILL NOT BE PERMITTED TO SELL.

Do any of the following categories apply to your products? (See GFM 2020 Rules of Operations for definitions)

\_\_\_\_\_ Pesticide/Chemical Free    \_\_\_\_\_ Organic    \_\_\_\_\_ Certified Naturally Grown

**Circle all dates you plan to attend the Market:**

| MAY   | JUNE       | JULY       | AUGUST       | SEPTEMBER  | OCTOBER |
|-------|------------|------------|--------------|------------|---------|
| 23 30 | 6 13 20 27 | 4 11 18 25 | 1 8 15 22 29 | 5 12 19 26 | 3 10    |

I have read and agree to the rules and regulations set forth in the Gatlinburg Farmers Market 2020 Rules of Operation and The TN State Farmers Compliance Guide.

It is my desire to be a vendor during the 2020 season of the Gatlinburg Farmers Market.

Signed: \_\_\_\_\_

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

Mail signed application with appropriate documents to the address below or hand to the market manager.

Gatlinburg Farmers Market  
 PO Box 1161  
 Gatlinburg, TN 37738  
 Attn: Marketing Manager

**GFM STAFF USE ONLY**

Date Application Received: \_\_\_\_\_ Is Application complete and signed?      Yes \_\_\_\_\_ No \_\_\_\_\_

Are all necessary documents attached?      Yes \_\_\_\_\_ No \_\_\_\_\_

Farm Inspection Date: \_\_\_\_\_

Approved By: \_\_\_\_\_

## **Release, waiver, and assumption or risk:**

I, the undersigned, am fully aware and understand the potential risks involved with my participation in the Gatlinburg Farmers Market. Specific dangers include damage to personal property, loss of personal inventory, serious physical injury, or death. Additional dangers include and are not limited to damages due to inclement weather and other reasonably anticipated risks that accompany participation in such an event. I acknowledge that I voluntarily participate in this event. I hereby agree to assume all risk of injury, damage to persons and property and/or death, and to hold the City of Gatlinburg, The American Legion, the Gatlinburg Farmers Market, and its volunteers, officers, agents, or employees harmless from any liability for any injuries, or claim for damage, damage to goods or death that may arise in connection with my participation in this market. This Hold Harmless Agreement also pertains to any actions of negligence by the City of Gatlinburg, The American Legion, the Gatlinburg Farmers Market, and its volunteers, officers, agents, or employees which may have caused or contributed to the injury, damages, or death. This agreement shall be binding upon my heirs and dependents as well as me. I participate freely and voluntarily in this market and expressly assume all of the risks of the event. I have also read and agree to abide by all the rules and regulations of the Gatlinburg Farmers Market. Applicant:

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