



Vendor Application

Vendor Information

Company Name _____

Owner Name(s) _____

Primary Mailing Address _____

City _____ State _____ Zip Code _____

Cell phone _____ Secondary Phone _____

Email _____

Primary Farm/Processing Location Address (If different from above) _____

City _____ State _____ Zip Code _____

Website Address: _____

Please list applicable social media handles for your business: Facebook _____

Twitter _____

Instagram _____

Product Information

Please list the produce and/or products you will be selling:

The Mission Market is a producer's market. In fairness to all, our vendors will be asked to describe the source of anything they sell that they themselves **do not** grow or produce.

Will everything you sell be grown or produced by you?

Yes No

Please list the products you hope to sell that you **do not** grow, raise, or produce yourself, and their sources, below.

Promotional Information: Please provide a brief bio and details about what makes your produce/products unique to include as we feature vendors on our website or in promotional materials:

Can you provide via email a jpeg image of you, your products, or relevant logo to include in promotional materials: ___Yes ___No

Stall Details

The Mission Market is arranged along Johnson Drive and vendors set up their tents over the 10' sidewalk. In most cases, each vendor's display should be oriented along one side of the tent. Customers will walk on the sidewalk, through the row of tents.

Stall preference: No. of stalls preferred _____ (2 max.)

If street stall availability becomes limited, are you able to sell from the lawn?
(Unloading product and parking vehicle elsewhere) Yes No

Stall assignments are made at the discretion of the market coordinator. Preference is given to vendors who have committed to the entire market season. An effort will be made to place vendors selling similar products not immediately adjacent to one another.

Season Schedule

In an effort to offer our customers a consistently full and vibrant market experience, we prefer that vendors attend the market each week. We offer a 20% discount if you pay for the 13-week season by April 30, 2019. If you cannot attend each week, please contact the market coordinator.

Market Pricing	Vendor Fee (1 stall)	Vendor Fee (2 stalls)
Weekly Fee	\$20	\$40
June-August, Sept. Third Thursday (13 Thursdays)	\$260	\$520
Pre-Pay full season by April 30	\$208 (Save \$52)	\$416 (Save \$104)
Pre-Pay full season by June 7	\$234 (Save \$26)	\$468 (Save \$52)

Checks should be made out to City of Mission

Market Guidelines

Please initial and sign below:

____ I have visited the market location and understand the stall arrangement.

____ I understand that the City of Mission will be communicating with me each week via email and occasionally by telephone and I will provide the City with current contact information.

____ I will supply my own 10' x 10' pop-up tent (white preferred) and table(s) and weights to secure my tent.

____ I understand my stall must be completely set up by 4:30 p.m. and will remove all of my items and any trash by the end of the market day.

____ I understand that unless I have pre-paid for the entire market season, I will have my booth fee available for collection by 4:30 p.m. each day either in cash or by check made out to the City of Mission.

____ I agree to clearly label (no smaller than 3"x5") each of my products with the appropriate description: Type of produce, origin of product (city/state, name/location of farm or warehouse) and price of item.

____ I have read the K-State Research and *Extension Food Safety for Kansas Farmers Market Vendors: Regulations and Best Practices* and can confirm that my products and practices meet the standards outlined in the document.

____ If licensing or inspections are required for my products, I can confirm that they are in compliance and up to date.

____ I understand all federal, state and local laws governing retail sales tax must be followed. I have completed or will complete by market time the required documents to report sales tax figures to the Kansas Department of Revenue. Sale tax ID #: _____ If you need help establishing a sales tax ID record, we can provide that. Please contact the market coordinator.

____ I understand that as part of regular promotion of the market, City staff will be taking photos at the market of vendors and their products and using them on the City website, on social media and in other promotional materials.

Owner Signature

Date

All vendors must submit a complete application and receive approval from the market manager. If you have questions about whether your application has been accepted, please contact the market manager using the methods listed below.

Mission Market Contact:

Emily Randel | City of Mission | 6090 Woodson Rd. Mission, KS 66202 | market@missionks.org
913.676.8368