

# DUVALL FARMERS MARKET 2022 Application

Non-Pro	ofit	Musician	Info O	K on WEB?	
Primary Description					
Non-profit or Music 'Group' Name					
Contact Person					
Type of Music e.g. Folk, Rock, Jazz, Blues, Celtic					
Day/Evening Phone					
Cell Phone					
Email Address					
Web Address					
Address					
Mailing Address					
WA State Tax UBI Number (REQUIRED if any sales) Emergency Contact Name &				Mark rows above OK to publish	
phone number				on MKT. WEB page	

Business/Farm Insurance Liability Company and Policy#: please add Duvall Farmer's Market as additional insured and provide a copy.

## MARKET DAYS

Please let the Market Manager know as soon as possible if you cannot to be present at market on your scheduled day. It is our desire to present to our community a full market with no holes. *PLEASE GIVE MARKET MANAGER 24 HRS. NOTICE* i.e. by noon on Wednesday. The more notice you can give us the better chance for us to find a replacement.

Μ	May	June	July	Aug	Sept	Oct
	5	2	7	4	1	6
	12	9	14	11	8	13
	19	16	21	18	15	
	26	23	28	25	22	
		30			29	

# **INFORMATION ABOUT HANDOUTS**

#### MUSICIANS AND NON-PROFITS

PLEASE LIST ALL ITEMS YOU INTEND ON GIVING AWAY OR SELLING AT MARKET – THIS INCLUDES MUSIC CD'S. (Please add a separate sheet of paper if more space is required.)

PLEASE NOTE: Participants will be granted a permit to sell or give away only what is listed. Please submit any additional items to the Market Manager for consideration before putting them out. (If you have multiple CD's just list CD's plural).

#### DESCRIPTION OF ALL PRODUCTS FOR SALE OR GIVEAWAY AT THE MARKET

### HOLD HARMLESS AGREEMENT

I have read, understand, and agree to comply with the **2022 Duvall Farmers Market Guidelines and Policies** and by signing my name below, I am bound by the terms and conditions outlined in the 2022 Duvall Farmers Market Application and the Guidelines and Policies. I understand and agree that any family members and employees at the Duvall Farmers Market site will be made aware of and bound by the same Guidelines and Policies of the Duvall Farmers Market. Vendors are responsible for the quality and safety of the products they sell and agree to comply with all Federal, WA State and King County Health Department Rules and Regulations.

By signing below, Vendor agrees to defend, indemnify, keep and hold harmless the Duvall Farmers Market, Duvall Farmers Market Board of Directors, Duvall Farmers Market Manager, and all other agencies the Duvall Farmers Market has agreements with, and all surrounding businesses, their agents and representatives from and against, any and all claims and demands, whether for injuries to persons, loss of life, or damage to property, on or off the premises, arising out of the use or occupancy of the premises by Vendor and shall defend at vendor's own expense any action brought against the Duvall Farmers Market and any of the above mentioned organizations or any other person or organization with which Duvall Farmers Market has a contractual relationship by vendor's acts or omissions.

Vendor further agrees to defend, indemnify, and save harmless the City of Duvall, its appointed elective officers, and employees, from and against all loss of expense, including but not limited to judgments, settlements, attorney's fees and costs by reason of any and all claims and demands upon the City of Duvall, its elected or appointed officials or employees directly or indirectly arising out of the permit issued for the Duvall Farmers Market. It is further provided that no liability shall attach to the City of Duvall, by reason of issuing the Permit for the Duvall Farmers Market.

Vendor Signature:	Date:

Parent/Guardian Signature:	Date:
if Vendor is under the age of 18	

By signing this application, Vendor agrees that they and their employees have read and will adhere and abide by ALL <u>Duvall Farmers Market</u> Guidelines and Policies.

PLEASE RETAIN A COPY OF THIS SIGNED DOCUMENT FOR YOUR RECORDS

THANK YOU!