## NBFM Summer 2023 Application

Congratulations! You made it to the North Bay Farmers Market (NBFM) application. Please fill out everything below, and let us know if you have any questions!

Applications are first come, first served. This means, the earlier you apply, the better for your business! First round of application reviews will happen the third week of March.

Applications received after the 2nd Saturday of March will be considered based on what space is remaining

Summer Market begins May long weekend and ends Thanksgiving weekend.

## \* Required

1.	Is this a new application or a revision of an existing? (i.e. going from occasional * to full-time or the season has started and you wish to add more products)
	Mark only one oval.
	New
	Revision

2. Please check below confirming your acknowledgment of the fee structure \*

	Fee Structure
	Seasonal
How to Total	(Total number of stalls x \$340) + \$15 Membership Fee + HST (13%)
Total Stalls	3 stalls on Wednesday + 2 stalls on Saturday = 5 Total Stalls
Example	(5 stalls x \$340) + \$15 fee + HST (13%) = \$1937.95
One Stall Example	\$340 + \$15 fee + = <u>\$401.15</u>
*pa	yment due upon approval to northbaymarketpayment@gmail.com
*note that the	above fees include the previous years "special event" and "volunteer" fees

	Occasi	onal	
Weekly Fee	HST (13%)	Weekly Total	One Time Membership Fee
\$30.97	\$4.03	\$35.00	\$15

Avg Weekly R	ate (per stall)
Seasonal	Occasional
\$16.71	\$35.00

Check all that apply.

- I have read and agree to the fee structure
- 3. Name of your business \*
- 4. Category (please note that vendors who do not make what they sell or buy to resell are not accepted at the North Bay Farmers' Market)

Mark only one oval.

- Producer
- Artisan
- Dual (ex. I sell food I grow/make and crafts)

5. Sub Category (Please select up to 2 boxes that best fit the products you sell) \* Check all that apply. MyPick Primary Producer (Vegetables, Fruit, Flowers, Maple Syrup, Honey, Meat) MyPick Secondary Producer (Defining Ingredient is grown/produced/processed at farm) Adult Clothing (Clothing, Cover Ups, Hats, Scarves) Alternative Healthcare (Reflexology, Massage Therapy) Baby/Child Care (Food, Clothing, Toys, Chewables) Baker (Traditional Bread, Pies, Tarts, Muffins, Cookies) Baker-Alternative (Gluten Free, Dairy Free, Vegan) Internationally Inspired Foods/Goods Body Care (Soups, Lotions, Essential Oils, Cosmetics) Cannery (Jams, Jellies, Pickles, Chutney, Mustard, Condiments) Ceramics (Pottery, Ceramic) Chandler (Soy, Beeswas, Paraffin, Blended) Confectionary (Sweets, Chocolate, Fudge, Candy, Sweet Pies, Fried Pies) Food Booth (Making food on site - Hot Dogs, Popcorn, etc.) Freeze-Dried (Miscellaneous items that have been freeze dried) Home & Garden Decor (Textiles, Mixed Media, Metal, Wood) Home Economics (Sewing, Knitting, Crochet, Quilts, Embroidery) Glasswork (Stained, Etched, Blown) Jewellery (Necklace, Rings, Bracelets, Anklets) Leather Products (Leather working) Masonry (Brick, Stone, Cement) Metalwork (Ironwork, Knives) Paper Products (Cards, Crafts) Pet Items (Anything for the pet in the house) Pre-Packaged (Frozen Pre-Made Foods, Pre-Made Pasta, Dry Mixes) Toys (For kids, adults) Visual Arts (Photography, Painting, Prints)

Woodworking (Furniture, Pens, Household Items, Carvings)

6.	Please indicate which day(s) and status you are applying for *
	Check all that apply.

	Seasonal	Occasional
Wednesday		
Saturday		

7.	Name	of	Primary	Contact	*
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8.	Confirm	primary	email	*
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- Phone Number (ex. 123-456-7890) \*
- 10. Mailing Address \*
- 11. City \*
- 12. Province \*

	ode *
	ok Page (type N/A if not applicable, we'll use this when sharing the bost on the market page)
Please d	lescribe your business in detail *
Please li	st all of the products you will be selling *
If exist	ing vendor, please indicate any new items below *

18.	Please attach 3-5 photo's showcasing your products	
19.	Please indicate the number of stalls needed for Wednesdays (Please put a number between 0-4)	*
20.	Please indicate the number of stalls needed for Saturdays (please put a number between 0-4)	*
21.	Does the nature of your business require Hydro access? *  Mark only one oval.  Yes  No	
22.	Stall Operation - (please indicate who may be operating/approved to run the booth besides the primary applicant)	*

23.	Will you be bringing a trailer? *
	Mark only one oval.
	Yes
	◯ No
24.	Date(s) Unavailable (type N/A if there are no dates you will miss) *
25.	Date(s) Requested (please type N/A if applying as a full-time vendor) *
26.	Please attach a copy of your health unit application (required for food vendors)
	*proof of application only, approval can be sent before first market
	<u>Click Here</u> for the Health Unit Application web page
	Files submitted:

27.	Please check this box indicating your intention to apply for your MyPick * status (after your first year for new producers)
	<u>Click here</u> for MyPick details
	Check all that apply.
	☐ I have my MyPick status, or will obtain
	Not applicable to the nature of my business
28.	Confirm you have read the image below and agree *
	Hold Harmless:  Should my vendor application be accepted by the North Bay Farmers Market, I, the Lessee shall hold harmless the North Bay Farmers' Market, and it's members, agents and employees from any and against all claims, demands, losses, costs, damages, actions, suits and proceedings by any third party that may arise out of, or may attribute to, all operations performed by or carried out by the Lessee, his/her agents, employees or servants, or anyone for whose acts he may be liable, howsoever caused.
	Check all that apply.
	I have read and agree to the hold harmless clause above
29.	Confirm you have read the image below and agree *
	Photo/Video Release Permission: I grant the North Bay Farmers' Market, its representatives and employees, the right to take photographs/videos of me and my property in connection with the market. I authorize the North Bay Farmers' Market, it's assigns and transferees to copyright, use and publish the same in print and/or electronically.
	I agree that the North Bay Farmers' Market may use such photographs/videos of me and my property with or without my name for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and web content.
	Check all that apply.
	I have read and agree to the Photo/Video Release Permission

30.	Please check here confirming you have read the <u>Rules &amp; Regulations</u> as well as * the <u>NBFM Code of Conduct</u>
	Check all that apply.
	I have read the Rules & Regulations as well as the NBFM Code of Conduct
31.	Please check here acknowledging you have read our <u>Privacy Policy</u> *
	Check all that apply.
	I have read and acknowledge the Privacy Policy
32.	By typing my name below, I certify the information above is true and correct * to the best of my knowledge
33.	Today's Date *
	Example: January 7, 2019

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