



2010-11 Winter Market Application

Located inside the Gulf of Georgia Cannery National Historic Site
12138 Fourth Avenue, Richmond

*For all enquiries regarding the Steveston Farmers & Artisans Market,
please contact us at the email or address below, or call*
Paula Morimoto 604-729-7326 or Michele Cupit 604-220-9983

Please do not contact the Gulf of Georgia Cannery.



STEVESTON FARMERS & ARTISANS MARKET
4111 Moncton St. Richmond, BC V7E 3A8
PHONE: 604-729-7326 FAX: 604-718-8096
WEBSITE: www.sfam.ca EMAIL: marketmanager@shaw.ca
REDMS 2946634





2010-11 WINTER MARKET APPLICATION

Application Date: _____

Applicant Name: _____ Website: _____

Business Name: _____ Email: _____

On-site Contact name and phone # (if different than above): _____

ADDRESS: _____ City: _____ PC: _____

Phone: _____ FAX: _____ Alt. Phone: _____

Please check: New Applicant Previous Vendor

I am a FARMER PREPARED FOOD VENDOR ARTISAN

If you are selling prepared foods, please review **Guideline for Sale of Food at Temporary Food Markets** available on our website or from Vancouver Coastal Health contact Jessica Lau, 604-233-3167.

Priority consideration will be given to those vendors committing to the full 11 weekends.

WHAT DO YOU PLAN ON SELLING? Please be specific (attach a separate sheet if necessary):

RATES:

Full commitment \$25.00 per day x 22 market days = \$550.00 _____

Casual commitment minimum 6 weekends (12 days) x \$40 per day = \$480.00 _____

TOTAL PAYMENT ENCLOSED \$ _____

If paying by credit card, please provide account information in the space below.

Card # _____ Expiry Date ____/____

Market dates: November 6/7 ; November 20/21 ; December 4/5 ; December 18/19 ; January 15/16 ; January 29/30 ; February 12/13 ; February 26/27 ; March 12/13 ; March 26/27 ; April 9/10

Winter Market Hours for the 2010-11 season are 10:00am to 3:00pm

Please make your cheque or money order payable to "Richmond Agricultural and Industrial Society". Please date your cheque or money order November 6, 2010 for full commitment fees. Credit card payments will be processed on the same schedule.

Please mail or drop off your completed application to the Steveston Community Centre, 4111 Moncton Street, Richmond V7E 3A8.

Only completed applications will be processed. Be sure to include the following:

- Complete Application Form
- Copy of Health Department approval for those selling prepared food products
- Full payment
- Insurance Form/Insurance Waiver Form

Staff Use Only

Date Application Received: _____ Received by: _____ Approved by _____ Date Approved: _____

Applicant Notified Date Notified: _____ Total Fees Due: \$ _____ Processed by: _____

Paid by: Credit Cheque Money Order *Please attach a duplicate receipt.* Notes:

Statement of Insurance

If insured, please complete this section

I, _____, from _____
(full name) (company, farm, etc.)

hereby confirm that I have personal injury insurance and commercial general liability of a minimum \$5million. I have enclosed a certificate of insurance naming Richmond Agricultural and Industrial Society and City of Richmond as additional insured.

Signature: _____ Date: _____

If uninsured, please complete this section:

I, the undersigned, acknowledge that the Richmond Agricultural and Industrial Society, doing business as Steveston Farmers and Artisans Market, requires and recommends that all participants and vendors have commercial general liability and personal injury insurance; however, as consideration for the privilege of the use herein granted by the Steveston Farmers and Artisans Market, wish to freely enter the following agreement:

1. Indemnification and Hold Harmless. The undersigned hereby agrees to protect, defend, indemnify and hold harmless the Steveston Farmers and Artisans Market and its board, officers, agents, employees and volunteers from and against all liabilities, obligations, claims, damages, penalties, causes of action, judgements and expenses (including, without limitation, actual attorney fees and expenses) imposed on or incurred by or asserted against the Steveston Farmers and Artisans Market by the undersigned.

2. Duty to Exercise Reasonable Care. The undersigned hereby expressly acknowledges their duty to exercise reasonable care while at the Steveston Farmers and Artisans Market.

3. Waivers and Releases. To the extent the above provisions do not cover a contingency, the undersigned hereby expressly agrees to waive and release the Steveston Farmers and Artisans Market and its assigns from any and all claims, obligations, direct or indirect, known or unknown, that the undersigned may have against the Steveston Farmers and Artisans Market or its assigns. The undersigned hereby acknowledges the relinquishment of any and all past, present and future rights, potential or real, as they may lie against the Steveston Farmers and Artisans Market.

Signature: _____ Date: _____

Print Name: _____



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