



BONGARDS MARKET 2023 VENDOR APPLICATION

Mission Statement: *To create a market with a focus on building community, and through service from the body of the church with surrounding community members, striving to provide wholesome, sustainable, and nutritious food sources.*

Business Name _____

Business Owner Name _____

Street Address _____

City _____ State _____ Zip _____

Business Phone _____ Preferred Phone _____

Email _____ Website _____

Please list all items you plan to sell at the Farmers' Market:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please submit copies of any required Permits, Registrations, or Licenses as well as a copy of your Minnesota Revenue Operator Certificate of Compliance (ST-19).

Please check all weeks you are planning to sell at the Market (Note: we prefer that you be willing to commit to at least four dates):

___ June 07	___ July 05	___ August 02	___ September 06
___ June 14	___ July 12	___ August 09	___ September 13
___ June 21	___ July 19	___ August 16	___ September 20
___ June 28	___ July 26	___ August 23	___ September 27
		___ August 30	

Please read and initial:

____ I have read and agree to abide by all Bongards Market Rules and Regulations.

____ I agree that St. John’s United Church of Christ is not liable for any injury, theft, or damage to either the buyer or seller, or their property, arising out of or pertaining to preparation for or participation in the Bongards Market, whether such injury, theft, or damage occurs prior to, during, or after the Bongards Market. Seller further agrees to indemnify and hold St. John’s United Church of Christ harmless for and against any claims for such injury, theft, or damage.

____ I understand that it is necessary that I carry my own general liability and product liability because St. John’s United Church of Christ does not provide this coverage.

____ I have submitted with this application copies of any required Permits, Registrations, and Licenses as well as a copy of my ST-19.

____ I choose to pay rental on a weekly basis.

____ I choose to pay rental on an annual basis.

	Weekly Fee	Annual Fee
1 Stall (10x20) *	\$10	\$100

* Note: Two persons may share one Stall for the \$10 fee; however, must stay reasonably within the 10-foot by 20-foot space.

Signature _____

Date _____

Please mail completed application, fee (if paying in advance), copies of any required Permits, Registrations, and Licenses as well as a copy of your ST-19 to:

Bongards Market or email: vmoteelall@gmail.com
c/o Vicki Moteelall
13670 102nd Street Questions? Call or text 612-710-0508
Cologne, MN 55322

We encourage advance applications to assure a spot at the market. However, let us know your plans, and if you prefer, bring completed application, with payment and required documentation to the first market day that you plan to attend.

Thank you for your participation. We look forward to seeing you at the Market!