

Cochrane Farmers' Market

Cochrane, Alberta



2020 VENDOR APPLICATION | Vendor Profile

This form is a **REQUIRED** component for *all vendor applications* and must be submitted in order to be considered as a vendor for any of the 2020 Markets hosted by the Cochrane Farmers' Market.

Vendor Information:

(* REQUIRED Contact Information)

Business Name: _____
(this is the name that will be used to promote you at the market)

Primary Applicant* (full name): _____

Secondary Applicant(s): _____

Mailing Address*: _____

Town/City

Postal Code*

E-mail*: _____
(the primary method of communication with vendors is through email, provide your preferred address)

Phone*: _____ **Mobile Phone:** _____

Website: _____

Social Media: list all the social media platforms you are currently active on; include your handle for each

How would you characterize your business ?

- primary source of income a secondary source of income a hobby Other: _____

How long has your business been in operation ?

- 0-2 years 3-5 years 6-10 years 10-20 years 20+ years

Are you a member of the AFMA (Alberta Farmers' Market Association) ? No Yes

Do you carry insurance for your business ? No Yes

Attendance:

Are we acquainted? Tell us if you are:

- NEW** Vendor - you have never been a vendor at the Cochrane Farmers' Market
 RETURNING Vendor - you have previously been a vendor at the following Cochrane Farmers' Markets:
 Saturday Markets: Full Time Part Time Street Markets Christmas Market

Which of the 2020 markets are you interested in attending ?

- Saturday Market - Historic Cochrane Ranche Site → Full Time Part Time
 Spring Market - Spray Lake Sawmills Family Sports Centre (SLSFSC)
 Cochrane Street Market - Historic Downtown Cochrane - 1st Street East
 2020 Cochrane Christmas Farmers' Market - Spray Lake Sawmills Family Sports Centre (SLSFSC)
(this event is by invitation only- vendors are selected from those that have indicated interest)

Each market has a separate application form which must be submitted for attendance approval.

Who will attend the market ?

- Myself Business Partner Friend/family member Paid staff Other: _____

Please list other markets, retail or consignment locations where your product is available: _____

Number of other Alberta markets you attend on a regular basis: 0-2 3-5 6-10 10+

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Product Information:

Product List / Description: Provide a COMPLETE list below of all items you intend to sell. Include all seasonal items and detailed description of items that will be sold at your stall, products not listed WILL NOT be allowed at the market. Attach another sheet if required.

Product Category: (Check all that apply **AND** provide description below)

Agricultural:	<input type="checkbox"/> vegetables	<input type="checkbox"/> berries/fruit	<input type="checkbox"/> meat	<input type="checkbox"/> plants/flowers	
Artisan Food:	<input type="checkbox"/> fresh/frozen processed food	<input type="checkbox"/> baked goods	<input type="checkbox"/> canned goods		
Craft/Art:	<input type="checkbox"/> sewing/fibre	<input type="checkbox"/> wood	<input type="checkbox"/> jewellery	<input type="checkbox"/> fine art	<input type="checkbox"/> other

As an Alberta Approved Farmers' Market, the Cochrane Farmers' Market must adhere to the 80/20 vendor rule. That means the Alberta product must be grown, produced, handcrafted, processed, or baked by you or an immediate family member or staff. Highest priority will be given to "make/bake/grow" (MBG) products.

NOTE: Applications from commercial, franchise or reseller product vendors will not be approved for attendance at the Cochrane Farmers' Market.

Do you hand-make, bake, or grow (MBG) your items? (answer for ALL ITEMS you would have on your table)

- YES** → If Yes, are your items:
- MBG in their entirety by you personally (all aspects by your hand)
 - MBG in part by you (provide details below)
- Where are your items produced:
- MBG in their entirety in ALBERTA.
 - Other: _____
- NO** → If No, are your items:
- Fair Trade (provide process of procurement below)
 - Franchise
 - Purchased commercially for resale
 - Other (describe) _____

Provide brief description of where/how your products are made: _____

Food Vendors:

Have you completed Food Safety Training? NO YES → Farmers' Market Home Study OR Food Safe Certification attached (food vendors must submit a copy for market records)

Food items (as listed above) are prepared in: home kitchen commercial kitchen (AHS approved)

mobile kitchen - AHS Permit Number: _____

Food Handling Permit attached (food vendors must submit a copy for market records if applicable)

Cosmetics Vendors: (any substance used to clean, improve or change the complexion, skin, hair, nails or teeth)

Do your products comply with Health Canada regulations: NO YES

Have you submitted Notification for your products to Health Canada: NO YES

Photos:

Submit a minimum of 3 photos showcasing your products. Photos will be used for evaluation and approval of new vendors as well as for vendor promotion by the Cochrane Farmers' Market.

NOTE: information provided on this form is utilized to select vendors/products that align with priorities established by the Cochrane Farmers' Market. The Cochrane Farmers' Market reserves the right to request additional information. Vendors are encouraged to provide supplementary information which may enhance your profile / product description.