

Cochrane Farmers' Market

SLS Centre



2025 VENDOR APPLICATION | Market by the Bow Full-Time

Vendor Information

Business Name (as provided on Vendor Profile): _____

2025 VENDOR APPLICATION | Vendor Profile is: Attached Previously Submitted

The products I will be selling at this market are consistent with the product list included in my Vendor Profile:

Yes **NO** → Provide updates: _____

Market Stall

Due to space limitations, requests for multiple stalls will be considered but are not necessarily granted.

	Stall Type	Stall Requirements
<input type="checkbox"/>	10' x 10' stall space Number of stalls Requested:	<ul style="list-style-type: none"> ▪ Is your vehicle or trailer required during market: <input type="checkbox"/> No <input type="checkbox"/> Yes → Vehicle type & length: ▪ Electricity is NOT available; will you be providing your own generator or mobile electrical source: <input type="checkbox"/> No <input type="checkbox"/> Yes → Type:
<input checked="" type="checkbox"/>	Food Truck	<i>due to circumstances beyond our control, Food Trucks & Coffee Carts are RESTRICTED from attending our market by the SLS Centre</i>
Special stall requirements, accommodations, or requests: _____		

The Cochrane Farmers' Market will allocate stalls as they see fit to provide a good market mix, vendor location will be determined for best benefit of the market.

If you are not accepted as a Full-Time vendor, would you be interested in attending Part Time? yes no

Market Dates (Saturdays | 9am – 2pm | June 7 to October 4)

Full-Time Vendors are expected to be in attendance for ALL market days. There will be no refund for missed markets. Should there be an unavoidable conflict for personal reasons, vendors MUST provide advance notice for the dates they will not be in attendance. The number of days absent will be monitored – requests for multiple absences, poor attendance, or failure to provide notice will affect your standing with the market.

IMPORTANT NOTE: Full-Time vendors MAY NOT request absence to attend other markets.

Notice Of ABSENCE: Indicate below **ONLY** those dates that you **WILL NOT be able to attend.**

- | | | | |
|----------------------------------|----------------------------------|------------------------------------|---------------------------------------|
| <input type="checkbox"/> June 7 | <input type="checkbox"/> July 5 | <input type="checkbox"/> August 2 | <input type="checkbox"/> September 6 |
| <input type="checkbox"/> June 14 | <input type="checkbox"/> July 12 | <input type="checkbox"/> August 9 | <input type="checkbox"/> September 13 |
| <input type="checkbox"/> June 21 | <input type="checkbox"/> July 19 | <input type="checkbox"/> August 16 | <input type="checkbox"/> September 20 |
| <input type="checkbox"/> June 28 | <input type="checkbox"/> July 26 | <input type="checkbox"/> August 23 | <input type="checkbox"/> September 27 |
| | | <input type="checkbox"/> August 30 | <input type="checkbox"/> October 4 |

Reason for requested absence: _____

Accuracy of Information | Acknowledgement of Vendor Guidelines and Standards

- I declare the information provided on this form and included with my **2025 Vendor Profile** to be complete and accurate.
- I agree to pay the rates as set out in this application should I be approved as a vendor.
- I agree to abide by the market policies, procedures, standards, and guidelines of the Cochrane Farmers' Market as detailed in the **2025 Vendor Guidelines.**
- As described in Part C of the **2025 Vendor Guidelines:**
 - I, the undersigned, do hereby consent and agree that the Cochrane Farmers' Market and the SLS Centre have the right to take photographs, videotape, or digital recordings of my products and name for the purpose of promotion.
 - I further give consent to the Cochrane Farmers' Market to disclose my Name, Company Name, and contact information to those persons inquiring about my product(s) and to have my information listed on the Cochrane Farmers' Market website.
- I agree to operate in accordance with any restrictions and requirements necessitated by Public Health Orders that may be in place during the markets to reduce the transmission of COVID-19 and other respiratory viruses as well as any other best practices or measures that may be implemented specific to the Cochrane Farmers' Market and/or the SLS Centre.
- I represent that I am at least 18 years of age, have read and understand the foregoing statements, and am competent to abide by these statements.

Name: _____

Signature: _____

Date: _____

Cochrane Farmers' Market

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Application Review and Approval | Vendor Confirmation

- Applications will be reviewed upon receipt. Please note that vendors are NOT approved on a 'first received' basis. Vendors are selected to ensure the market is balanced across all categories. Vendors will be contacted if additional information is required to complete a review of your application.
- Vendors approved for attendance will receive an email confirmation of application as a Full-Time vendor.
- Vendors approved for attendance will be responsible to pay the following vendor fee:
 Fee for Full-Time Vendor (per 10'x10' stall space)..... **\$ 325.00**
- DO NOT send payment with the application form. If approved, Vendor fees due and payment information will be provided with your confirmation email. Approved Full-Time vendors are requested to pay in full prior to May 15th to ensure stall is reserved for the 2025 season. The Cochrane Farmers' Market can accept payment by cash, cheque, or e-transfer.

Application Checklist for Submission

- 2025 Vendor Application | Vendor Profile:**
Submit Vendor Profile with this application or indicate that it has been submitted previously. Refer to the checklist for the Vendor Profile and ensure:
 - all business and contact information has been included
 - all product information is complete, attach additional sheets if required
 - all required documents related to your product category have been submitted** Submit the Vendor Profile form only ONCE for the 2025 application process; should the information provided on the form change during the season the vendor is responsible for providing updates.*

- 2025 Vendor Application | Market by the Bow Full-Time**
 - Provide space requirements and specific vehicle and/or stall set-up information so we know how to best locate you in the market
 - Indicate any dates that you are unable to attend due to unavoidable conflict (*absence should only be related to family or personal reasons*)

- Cochrane Farmers' Market | 2025 Vendor Guidelines**
 - Vendors are expected to read the Vendor Guidelines and agree to abide by the market policies, procedures, standards and guidelines. Ensure you have reviewed this document including Part D – Conditions Specific to Outdoor Markets at SLS Centre

- Sign and Date** the application form

- Certificate of Insurance:** may be provided after vendor is confirmed for attendance
 - Mandatory for Full-Time vendors

Submit electronic files (good quality PDF scan or photo) of Application Forms and attachments to email address - OR - submit copies of Application Forms with attachments to our mail address as provided below.

Mail Address ONLY:
Cochrane Farmers' Market
104 Griffin Road East
Cochrane, Alberta T4C 2B9

Market line: 403-851-0562 (voice mail only)
Manager Direct: 403-932-1427
Email: manager@cochranefarmersmarket.ca