

"Bringing the best of the county to the heart of the city."

Sampson Farmers Market at Clinton City Market
215 Lisbon Street

VENDOR APPLICATION

MAIL Application To: Sampson Farmers Market, PO Box 199, Clinton, NC 28328
FAX To: (910-592-4261), E-mail (awhetten@cityofclintonnc.us), or
In-person delivery to: (227 Lisbon St, Clinton NC 28328).

CONTACT INFORMATION (please print)

Vendor Business Name: _____ Vendor Contact: _____

Names of authorized selling agents*: _____

**If you are in need of a selling agent, please contact Audrey Whetten at 910-299-4904.*

City, State, Zip _____

Work Phone #: _____ Home Phone #: _____

Cell Phone # _____ E-mail: _____

Website: _____

PRODUCTS: Please list all products you are proposing to sell: _____

If you do not intend to be at the market weekly from May – October, please indicate the month(s) you will be attending by checking on the lines below.

May ___ June ___ July ___ August ___ September ___ October ___

I would like to sell at the (circle): Wednesday market Saturday market Both markets

Do you need electricity? (circle one): Yes No

Electricity is available on a limited basis to vendors; first come, first served.

LICENSES, PERMITS, & REGULATIONS

All vendors shall be responsible for meeting all federal, state, and local regulations.

AGREEMENT AND SIGNATURE

By submitting this application, I affirm that the facts set forth in it are true and complete. By signing below, I certify that I have read, understand, and will adhere to all applicable market rules as stated in the Operating Guidelines. I understand that failure to comply with these specific guidelines may result in the termination of my participation in the Sampson Farmers Market.

Signature: _____ Date: _____

We are looking forward to a great season!

If you have any questions, please contact Audrey Whetten, Market Manager, at 910-299-4904.