



Cape Riverfront Market
2018 Vendor Application

Old Town Cape, Inc.
338 Broadway Street, Ste. 401
emilyvines@oldtowncape.org
573-334-8085

Information:

Farm/Business/Booth Name _____

Owner's/Vendor's Name(s) _____

Farm/Business Address _____

City _____ State _____ Zip _____

Vendor's Mailing Address (if different from Farm/Business Address)

Phone _____ Type: Home Cell

Email _____

Website/Facebook/ Instagram:

If customers wish to contact you, what information should we give them:

Other farmer's markets or places to get your goods:

Names of representatives that may work at your booth:

Forms of payment accepted at your booth (cash, card, etc.):



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Vendor Space and Fee Structure:

- Make sure to read ALL of the information listed in the Vendor Informational Packet, then check boxes below, and add up the total.
- Make checks payable to: Old Town Cape, Inc.

Vendor Type	Fees			Total (list number of markets, then amount)
	Single (10 X 24)	Double (20 X 24)	Electricity (per 110 outlet)	
Daily	\$15	\$25	+\$5	\$
Specialty	\$25 (a day)	\$35 (a day)	+\$5	\$
Bi-Weekly	\$115	\$185	+\$35	\$
Seasonal	\$150	\$225	+\$35	\$

Dates:

- 26 total market days
- Daily and bi-monthly vendors: please circle the dates you would like to participate
- Seasonal vendors: please X out any dates you know will be gone

May	5	12	19	26	
June	2	9	16	23	30
July	7	14	21	28	
August	4	11	18	25	
September	1	8	15	22	29
October	6	13	20	27	



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Vendor Type and Products:

- Check all vendor types that apply to you, and any goods that apply within the category.
- If you check more than one vendor type, estimate the percentage of your goods/products that would fall under each category
- Example: If you are an artisan craft vendor that would also like to sell jams or jellies, you might estimate that you would have an 80% for “artisan crafts” and 20% for value-added products.

Vendor Type (Check all that apply)	Goods (Check all that apply)	Percentage of Goods (Goods in more than one category)
Farm Products	Fruits and Vegetables Meats Flowers Maple Syrup Fish Un-cracked Nuts Eggs Cheese Honey	%
Value-added Products	Jams/Jellies Bread Other Baked Goods Roasted Coffee Pickles/Salsa Cookies/Bars Sweets Other	%
Prepared Foods	Food Beverages	%
Artisan Crafts	Jewelry Pottery Crafts Sewn Items Home/Body Care Sculpture Paintings Woodcraft Knit/Crochet Other	%
Specialty Items/Other/Services		%



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Please provide a complete and detailed list of the products you will sell at the Cape Riverfront Market. List any and all specific fruits, vegetables, meats, types of baked goods, crafts, foods, and beverages, etc. List separately any resell produce you will sell at the market. Attach additional paper if needed. All artisan craft vendors must submit (with application or e-mail) photos of items to complete their application. Applications without a detailed list will be considered incomplete. **In order to sell an item at the market, it must be listed on your application.**

Farm/Business Description:

-Please provide a brief summary about your farm or business.

How many years have you been in business? _____

How far do you travel to vend at the Cape Riverfront Market?

Describe the size of your business:

-Number of employees, number of acres in production, etc.

Is there anything unique that stands out concerning your goods and services (Female-owned business, self-starter, under the age of 35, etc.)? Please describe below. Artisan craft vendors please give a description of the materials and process to create them. Write on back of sheet if needed.



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Agreement:

-Vendor fee must accompany application. Please initial, print, and sign your name below to complete your application.

_____ (Initial) I have read and understand the information provided in the Cape Riverfront Market 2018 Vendor Informational Packet and Vendor Application, and agree that:

- I will abide by the outline rules.
- I will not sell any products that I have not grown, produced, or made myself (with the **approved** exception of selected specialty products).
- I possess any and all licenses or certificates required by the city, county, and state of Missouri to market said products.
- I will comply with all federal, state, and local regulations.
- The product I am selling is produced within the 100-mile requirement outlined in the Vendor Informational Packet (with the **approved** exception of the specialty vendor).
- I understand that space and location are both limited and will be determined by the market manager.
- I understand that the information on this application may be used for marketing purposes.

_____ (Initial) I agree to hold harmless the Cape Riverfront Market Manager and Old Town Cape, Inc. from any and all liability or claims of injury or damage arising out of my acts or negligence while vending and participating in the Cape Riverfront Market.

Signature: _____

Print Name: _____

Date: _____