



## Comstock Township Farmers Market 2024 Vendor Application

Business Name: \_\_\_\_\_ Tax ID # \_\_\_\_\_

Primary Contact: \_\_\_\_\_

Street Address: \_\_\_\_\_ City/Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Web site: \_\_\_\_\_

Social Media: Facebook.com/ \_\_\_\_\_ Instagram.com/ \_\_\_\_\_

Other/ \_\_\_\_\_

Please list names of employees, partners or family members who will be selling at the market:

\_\_\_\_\_

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How will customers pay you?

- Check  Cash  Debit/Credit

Tell us about your business. Please send or include a short biography, including your mission, production practices, history, etc. – anything that you want the Farmers' Market shoppers to know about you. It will be shared on social media and on the Park and Rec's website.

Email: [farmersmarket@comtockmi.gov](mailto:farmersmarket@comtockmi.gov)

Identify the primary product category that best represents your business: *Select only one*

- Produce  Plants/Flowers  Value-Added Food  
 Meat/Seafood  Crafts/Art/Services  Prepared Food  
 Dairy  Eggs  Pet Products  
 Community

Check all boxes below that describe your operation and production practices: *\*By USDA definition.*

- Certified Organic\*  Free Range/Pastured  
 Certified Naturally Grown  Using Organic ingredients\*  
 MAEAP-verified  No Added Hormones, Antibiotics  
 Grass Fed or Grass Finished\*  Cottage Food

## Comstock Township Farmers Market 2024 Vendor Application

**What products does your business plan to sell?** Please list all products, and be specific, enclosing a separate sheet if necessary. If you plan to resell any products, please provide names and contact information for the farms or businesses where you will be purchasing these products.

	Product	Where grown/made	Resell Name/Contact info
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

**Please mark the dates you would like to apply to participate in at the market below:** Market days are on Mondays from 3-7. There will not be a market on Labor Day- Monday, September 2

June 3	July 1	August 5	September 9
June 10	July 8	August 12	September 16
June 17	July 15	August 19	September 23
June 24	July 22	August 26	September 30
	July 29		

**Special Market- 3<sup>rd</sup> Annual Fall Fest:** 12-3pm

Saturday, September 28:

Our mission is to create an opportunity to sell and buy locally grown/made products through community empowerment and celebration.

**Comstock Township Farmers Market  
2024 Vendor Application  
Certificate of Liability Insurance**

Required 30-days prior to attending the Comstock Township Farmers Market: a copy of your organization's certificate of General Liability Insurance policy in the amount of \$1,000,000 per occurrence and Motor Vehicle Liability Insurance policy in the amount of \$1,000,000 per occurrence combined single limit for Bodily Injury and Property Damage. Coverage shall include all owned vehicles, non-owned vehicles and hired vehicles. All coverage as described above shall be endorsed to reflect the following as Additional Insured: "Comstock Township, its elected or appointed officials, all employees, volunteers, all boards, commissions, and/or board members, including employees and volunteers there of (exception Workers Compensation)." It is understood and agreed by naming Comstock Township as additional insured, coverage afforded is considered to be primary and any other insurance Comstock Township may have in effect shall be considered secondary and or excess. Named organization must require proof of insurance coverage, as stated above, from all sub-contractors and vendors.

All policies as describe above, shall include an endorsement stating that it is understood and agreed thirty (30) days, ten (10) days for non-payment premium, Advanced Written Notice of Cancellation, Non-Renewal, Reduction, and/or Material Change shall be sent to Comstock Township Director of Parks & Recreation, PO Box 449 Comstock, MI 49041.

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**Release of Liability**

I, the undersigned, consent to participate in the Comstock Township Farmers Market or being the parent or legal guardian of such a participant. In consideration of my or another's participation in the Comstock Township Farmers Market herby for myself, and any participant for who I am parent or legal guardian, release, discharge, waive and hold harmless Comstock Township, its officers, agents, representatives and employees, from and against any and all liability, actions, causes of actions, claims known or unknown now existing or that my arise in the future arising out of or connected in any way from participation in the Comstock Township Farmers Market even though liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above. I also hereby for myself or any participant for who I am parent or legal guardian, waive, release and discharge any and all claims for damages for death, personal injury or property damage which may subsequently accrue as a result of participation in the Comstock Township Farmers Market. I acknowledge that Comstock Township is not to be held responsible for damaged or lost items submitted as participation in the Comstock Township Farmers Market.

I understand and acknowledge that accidents may occur during an event or activity which may result in personal injuries and/or property damage as a consequence thereof. Knowing the risks involved, I nevertheless, agree to assume those risks and to release and hold harmless all of those persons and entities mentioned above who, through negligence or carelessness, might otherwise be liable to me, or my heirs or assigns, for damages.

I further understand the hazards of the novel coronavirus (COVID-19) and its variants and am familiar with the Centers for Disease Control (CDC) and prevention guidelines regarding this disease. I

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acknowledge and understand that the circumstances regarding this disease are changing from day to day and that, accordingly, the CDC guidelines are regularly modified and updated, and I accept full responsibility for familiarizing myself with the most recent updates. I will adhere to CED guidelines, and regardless of the risks associated with COVID-19 and its variants, which I readily acknowledge, I hereby willing choose to participate in Comstock Township Activities. I fully assume the risks of illness or death related to this disease arising from my being on the premises and participating in the activities.

It is further understood and agreed that this waiver of release is an assumption of risk and is to be binding on my heirs and assigns. I agree to be fully responsible for any injury or damage to any non-participant who may accompany me and hold the Township, its officers, agents, representatives and employees harmless from any liability or actions which may result. I further agree to abide by and accept all of the rules, conditions and regulations of Comstock Township, which are a condition of my participation in this program.

### Publicity Release Form

Comstock Township has my permission to use my photo/image, voice or an item created by myself including photos, drawings/illustrations, or other submitted item for promotional or educational purposes only including exhibition displays. Comstock Township will receive the right to reproduce, at its own expense, images including, printed materials, online publications, news releases, videos, advertisements, media sites, website and social medial outlets. I also provide permission for my name to be used in conjunction with the photos, videos or exhibition items. I also understand that no royalty, fee or other compensation shall become payable to me, by reason of such use. I hereby release Comstock Township and its agents and assigns from any and any claims which may arise out of or are in any way connected with such use.

***I do, hereby, certify that the above information is truthful and accurate, as to my best belief and knowledge and agree to abide by all rules and regulations contained in the Township's Farmers Market Guidelines and Policies and Code of Conduct.***

Vendor Name _____	Market Manager _____
Vendor Signature _____	Market Manager Signature _____
Date _____	Date _____



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