



**COMOX VALLEY FARMERS' MARKET ASSOCIATION  
APPLICATION FOR MEMBERSHIP AND VENDOR CONTRACT - 2008**



Vendor Name: \_\_\_\_\_

Farm/Business Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

1. **Are you a primary agricultural producer?** Yes/No \_\_\_\_\_
2. **Have you successfully completed the Food Safe Level 1 program?** (*circle applicable*) Yes      No  
Please attach a copy of your certificate.
3. **All applicants**, please list all products for sale (use reverse if necessary):

4. Vendors receive 12 feet of space. Members of one year or more may apply for a reserved space.  
**Do you want a reserved space?** Yes      No      **Preferred location?** \_\_\_\_\_

Vendors may also apply for an additional 6 feet of space for \$225.00 per year if paid in full two weeks prior to the first market or \$250.00 if paid by post-dated cheque dated no later than June 1 (all payments must accompany application). **Do you want an additional 6 feet of space?** Yes      No

5. If **crafts or manufactured items** are to be sold, please provide (on reverse):
  - a. List of materials used
  - b. Where you acquired your primary ingredients (e.g. grown/produced yourself or list supplier)
  - c. Attach photos that show your craft/item
6. If **food products other than primary agricultural** are to be sold, please provide (on reverse):
  - a. Where you acquired your primary ingredients (e.g. grown/produced yourself or list supplier)
  - b. Concessionaires must also attach a copy of their menu as well as a copy of all applicable permits.
7. I have read and understand the rules of the Comox Valley Farmers' Market Association and agree to comply. I agree to submit to an inspection of my operations and/or a review of my market sales if requested by the Board of Directors.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Return applications to: CVFMA, P.O. Box 3301, Courtenay, BC V9N 5N5 or FAX to 337-8404.  
For more information, please contact Glenn Miller, Market Manager, at the market or by phone at 218-0321.

**PLEASE VOLUNTEER!** Check below where you would like to lend a hand:

\_\_\_\_\_ Work parties    \_\_\_\_\_ Special Events    \_\_\_\_\_ Promotions    \_\_\_\_\_ On market day

APPROVED: \_\_\_\_\_ DATE: \_\_\_\_\_ Voting: \_\_\_\_\_ Non-voting: \_\_\_\_\_