

## **2023 Retail Food Vendor Application**

Contact Name: _	
Business Name: _	
Mailing Address: _	
_	
Business Address:	
_	
Phone Number(s): _	
Email:	
Website:	
How should customers	contact you: Phone Email Website
# Years in Operation or	Founding Year:
Food Manufacturer:	
Address of Manufacture	er:
Employee Name(s): _	
Kansas Sales Tax #	
Can you take credit car	ds? Yes No Do you require electricity? Yes No
Space Requested 1	2' X 15' OR 20' X 25'
Detailed directions to y	our place of preparation:

1	
2	
3	
4	
5	
7	
8	
in an effort to better connect Mar	ket customers to you, please write a short biography or description of your
	opear on media designed to promote the Bonner Springs Farmers' Market.
No guarantee of exclusivity o	of products are made or implied.
Please attach a copy of all red	quired documents. (Insurance, Licenses etc.)
S	ocument verifies that the vendor has received, carefully read, ll provisions in the 2023 Market Policies.
Signature:	Date:
	Ear DCEMA Has Only
	For BSFMA Use Only —————
Approved	Approval Date:
Paid	Check Cash Card
Payment Amount: \$	Payment Date:

Please list the products you would like to sell at the Market.



## **Bonner Springs Farmers' Market Association**

## 2023 Membership Form

The Bonner Springs Farmers' Market Association has been formed to provide locally grown fresh foods, farm products and local producer value-added products to the citizens of Wyandotte County and surrounding areas, and to encourage commerce, entertainment and trade in downtown Bonner Springs, KS.

Please Print:
Contact Name:
Mailing Address:
Landline Phone Number:
Cell Number:
Email Address:
Website if Applicable:
How would you like the BSFMA to contact you: Please Check Appropriate Box
Phone Email Text Message
For BSFMA Use Only
Paid \$20 Dues: Check Cash Card
Vendor Application Included
Payment Date: