

2024 Sturgis Community Market Vendor Application

Vendor Name: _____

Farm or Business Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

County: _____ Phone: _____

Email: _____

Please provide a brief description of each item(s) you wish to sell at the Sturgis Community Market. Attach pictures if necessary to illustrate your product.

***No retail or resale items are permitted.**

Number of 10'x10' booth spaces you are requesting to rent: _____

I have read the attached Sturgis Community Market Operating Guidelines, the MS Dept. of Agriculture and Commerce Permit Requirements for Farmers Markets Vendors, and the MS Cottage Food Bill. I certify I am complying with all local, state, and federal regulations to participate in the Sturgis Community Market. I understand that failure to comply with any Sturgis Community Market, local, state or federal policy will result in my dismissal from the market.

Print Name: _____

Signature: _____

Date: _____

Submit application and photos by mail or email:

Mail:

P.O. Box 97

ATTN: Sturgis Community Market

Sturgis, MS 39769

Email: sturgiscommunitymarket@gmail.com

FOR INTERNAL USE ONLY

\$15 APPLICATION FEE

PAYMENT TYPE:

CASH CHECK Venmo

PAYMENT DATE: _____

PAYMENT AMOUNT: _____