Farmers' Market

Certificate Number	

Fee: \$30/Season, \$5/Day_____

Vendor Application 2025

Village Clerk Signature

Business Name:	Contact Person:	
Address:	Phone:	
Email:	Products:	
Produce Vendors: Where produce v	as obtained	
Emergency Contact:	Emergency Phone:	
Food/Egg License #	HUL	
	O AT THE EVENT-(Except at the May 8 th Mother's day Event) you must pay at the Nain St. Brighton, IL 62012. CHECKS PAYABLE TO: VILLAGE OF BRIGHTON	√illage
presented at your area each weel E-Z Up tent or umbrella, signage, bags	from 3:00- 3:30 p.m. each Thursday. All Vendors will receive a placard and it means are responsible for bringing any of the following items (if desired): tables, or other suitable packaging, scales, and display material. Please take care to leave y roduct. Full season Vendors will have a designated/permanent spot. Everything youndmade by you!	, chairs, our area
home kitchen to register with the Ma	LERS: The Cottage Food Operation Act requires anyone wishing to sell foods made in coupin County Health Department before selling products to the public at a Farmers the Macoupin County Public Health Environmental Division at 217-839-4114 or 217-	s'
Please include a copy of your C	ottage License AND/OR Egg Producers License with your registration	form.
	September 11, 2025 each Thursday 4-7 p.m., at Schneider Park, 100 N. Maplevent on May 8 is free with seasonal registrations.	<u>e St.</u>
weather and any other loss, cost, taxe fee, agree to waive, release, and hold from any and all claims, liabilities, der	ted with participating in this event, including but not limited to, falls, the effects of t s, or damage. Having read this release and in consideration of the acceptance of my harmless, the Village of Brighton, and any other sponsors, all other workers, and vol nands, damage, loss, cost, and expense, of any kind arising out of my participation in he waiver information above and will abide by the rules and regulations for this even	entry lunteers n this
Vendor Signature	Date	

Date