

HARWICH FARMERS' MARKET  
2021 APPLICATION

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

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

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

Please list the items you wish to sell or attach crop list – Processed food vendors must list all items to be included: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Application for (check one): \_\_\_\_\_ season \_\_\_\_\_ weekly: \_\_\_\_\_ (dates)

Please include fee with application

Seasonal fee: \$250.00 \_\_\_\_\_ Weekly fee: \$25.00 \_\_\_\_\_ (includes parking for one vehicle)

I hereby agree to comply with all rules and regulations governing Harwich Farmers' Market and the Harwich Health Department.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Fee enclosed: \$ \_\_\_\_\_

**Payable to:** Harwich Historical Society

**Mail to:** Harwich Historical Society  
80 Parallel Street  
Harwich, MA 02645

\*\*This application does not guarantee your participation, you will be contacted by the Harwich Farmer's Market Manager to confirm your place in the 2021 market. Your seasonal or weekly fee will be refunded if you are refused participation. Weekly fees will not exceed the seasonal fee of \$300.00 for any one vendor. Payment schedules may be arranged upon request. Please contact [harwichfarmersmarket@gmail.com](mailto:harwichfarmersmarket@gmail.com) or [harwichhistoricalsociety@verizon.net](mailto:harwichhistoricalsociety@verizon.net) for information or questions.

Harwich Farmer's Market Review \_\_\_\_\_ Date: \_\_\_\_\_

Board of Health Review \_\_\_\_\_ Approved: \_\_\_\_\_ Date: \_\_\_\_\_

Vendor notification: \_\_\_\_\_ Date: \_\_\_\_\_