



**Cuero Downtown Farmer’s Market
501(c) NON-PROFIT ORGANIZATION
2020 VENDOR APPLICATION**

Complete Applications must be returned to the Cuero Main Street Office by Wednesday before Market Day.

Call Sandra Osman at 361-485-8008 or email mainstreet@cityofcuero.com with any questions. **PLEASE PRINT/TYPE**

Business Name: _____

Name of Solicitor/Contact Person: _____

Names of any other Solicitors at your booth: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **Fax:** _____

Email: _____ **Website:** _____

Taxpayer ID: _____

To find out if you qualify for a Tax ID exemption, please visit this link: <https://comptroller.texas.gov/taxes/publications/96-211.pdf>

Please explain the nature of your booth representation. If your application is accepted, you will be informed. Add an additional space if necessary.

Please note the 2020 date[s] you are applying for:

March 28* April 25 May 23 June 27 July 25 August 22 Sept. 26 Oct. 24*

*** Market on Main extended event: May require extended vending times**

FEE EXEMPTION for 501(c) Non-Profit Organizations

- Each space measures 10’ by 10’ under the covered Market Pavilion
- Vendor may provide their own set up needs such as tent/ez tent, table, extension cords, etc. and provide proper tie down to ensure stability.

The market is scheduled to be open from 9:00 a.m. to 1:00 p.m. at 207 E. Main Street under the Cuero Library Market Pavilion in front of the Cuero Main Street/Chamber and City Hall Offices.

Vendor Spaces are assigned on the first come, first served basis. **PREFERRED BOOTH LOCATION PROVIDED TO ANNUAL/CONSISTENT VENDORS.**

Vendor set up begins at 7:00 a.m. the day of the market and must be completed by 8:30 a.m.

Bathrooms are available for vendors in the Public Restrooms marked and located on East Main St.

Please check each item to indicate your agreement:

___ I have read and agree to abide by all of the Association’s Rules and Regulations.

___ I understand that the Association can request that a vendor leave the market premises at any time if in violation of any of the Association’s Rules and Regulations.

___ Upon acceptance, I agree to indemnify and hold the Association, the Market and their officers, directors, members, employees, volunteers, and agents harmless from and against any and all claims and demands, whether for injuries to persons, loss of life or damage to property, on or off the premises, arising out of the use or occupancy of the Market by me or my family, employees or agents and shall defend at my expense any actions brought against the Association, the Market and any of their officers, directors, members, employees, volunteers, and agents by the acts or omissions of me or my family, employees or agents.

___ I agree to leave my vendor space clean and free of debris by one hour after close of the market (1:00 p.m.)

___ I understand that the Association requires that there is no smoking or consumption of alcoholic beverages on the market premises.

___ I represent that all information provided in this application and that will be provided by me, or my authorized representatives, throughout the application process is true and correct in all respects. I understand and agree that if any of the information is false or inaccurate that the Association may reject my application and if the false or inaccurate information is discovered after my acceptance into the Market, I may be asked to leave.

You must agree to all of the above items and indicate your agreement by checking each space in order for your application to be considered.

Signature of Solicitor or Authorized Representative: _____

Printed Name of Signing Person: _____

Title: _____ Date: _____