



**2019 Edgewater Farmers Market Application
Makers Tent**

Thank you for your interest in the Edgewater Farmers Market 2019 season, which is scheduled to run every Saturday from June 15 through October 12. Our Farmers Market is located in the heart of our community, in the Broadway Armory parking lot at 5917 North Broadway.

We are excited to offer the Makers Tent opportunity. This is a place for makers to test, promote, and sell their wares. To qualify for the Makers Tent, vendors must be promoting handmade products/ wares. This includes food, jewelry, beauty products and art.

Application Instructions:

Please answer all applicable questions as completely as possible, attaching additional pages as necessary. To be considered as a Makers Tent vendor, we must receive your completed application, all supporting documents, and payment by **Friday, April 5, 2019**. Applications may be submitted by mail or emailed to farmersmarket@edgewater.org.

Contact Information

Vendor Name: _____

Contact Name: _____

Business Address: _____

City, State, Zip: _____

Business Telephone: _____ Cell Phone: _____

E-mail address: _____

Website: _____

Participation Dates

Selected dates are not guaranteed. Dates are filled on a first-come, first-served basis.

Single Saturday Maker Table:

June 15	June 22	June 29	July 6
July 13	July 20	July 27	August 3
August 10	August 17	August 24	August 31
September 7	September 14	September 21	September 28
October 5	October 12		

Monthly Maker Table (for those who would like to be at the farmers market for a month at time):

July
August
September

Indicate in the space below your preference of the selected dates

First Choice: _____

Second Choice: _____

Third Choice: _____

3. Involvement

Please give a description of what you plan on doing at the Makers Tent. *Example: Selling and offering samples of my food product; Selling my artisan beauty products; Selling handmade art.*

4. Permitting

Makers Tent vendors are responsible for securing all appropriate licensure from the City of Chicago to sell their wares at the Edgewater Farmers Market.

Are you required to have a health department license/safe food-handling certificate?

Yes ___ No ___ (If yes, please attach a copy.)

Are your products made in a certified kitchen? Yes ___ No ___ N/A ___

Certified kitchen address: _____

Payment

Dates are not secured until both application and payment are received.

Chamber members: \$50 x ___ (# Saturdays) = \$ _____

Non-members: \$75 x ___ (# Saturdays) = \$ _____

Monthly member: \$175/month

Monthly non-member: \$200/month

Please specify payment type by checking appropriate box below. (Note: If paying by credit card, you will be charged an additional convenience fee of **3.25%**)

Check

Money Order

Visa

Mastercard

Discover

American Express

Card Number: _____

Expiration Date: _____ CVS Code: _____

Name as it appears on Card: _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____

Make Check or Money Order payable to: **Edgewater Chamber of Commerce**

**Edgewater Chamber of Commerce 1210 W. Rosedale Chicago, IL 60660
p. 773-561-6000 e. farmersmarket@edgewater.org www.edgewater.org**