2026 Dousman Farmers Market Vendor Application

Name:_____

Address:_____

_____

Phone:_____ (home) (mobil)

Email:_____

Website:_____

Business Name:_____

Please complete all applicable information and include a photo of your booth setup:

Are you a: Farmer Crafter Other
What items will you sell:
Vegetables Fruits Flowers Plants Honey Maple Syrup

Other:(specify, include license number for processed foods)

Site Payment-Site size 7x4 can do one 6 foot table need more room get two areas no discounts for more.
_____One spot for the season 23 weeks $100 (non-refundable)
_____Two spots for the season 23 weeks $200 (non-refundable
_____One spot for one week $15 due on the day there
Weekly participant is expected (if you know of a week you will NOT be here please provide, we know things come up its called life please let coordinators know ASAP)._____

Do your products vary throughout the season?____yes___no

Do you do Facebook posts _____yes ____no

Do you do blast email for your shows your doing ____yes _____no

How do you get the word out about the shows your doing?
_____

Winter Market Details
Dates are November 4, 2026-April 28, 2027

If you need to miss the market or have concerns please contact Jane at 262-719-0157

Please help promote the event it takes a everyone participation to make this event successful.

It is the vendor responsibility to look after their own products and safety. The coordinator has the final say on vendors and weather cancellations.

Vendor's Statement of Understanding

I,_____, have read and understand the policies and procedures as described for the Dousman Farmer Market and herby agree to abide by them. Further, I agree to sell only those items listed in the policies and procedures. I further acknowledge full responsibility for all my activities (and those assisting me) in the Dousman Farmer Market throughout the term of this permit. I have read the Wisconsin Food Safety Regulations and understand that Waukesha County may require further permits for selling, depending on the goods. By signing this agreement, I agree that all my items at the market (including produce, plants, flowers, herbs etc...) are grown or produced on land owned, rented or leased by the actual vendor in Wisconsin. I also agree to an on site inspection of the growing area.

I understand that violations of these policies and procedures may result in my being barred from further participation in the market. I also understand that the Dousman Area Chamber of Commerce does not carry any insurance policies to cover individual participants and that I am herby considered carrying my own personal liability and product liability policies. The Dousman Area Chamber of Commerce and St. Mary's church reserve the right to modify the policies and procedures as needed at any time. Vendors agrees to indemnify and hold the Dousman Area Chamber of Commerce and St. Mary's Church harmless from any and all claims and liabilities.

Signature:_____ Date:_____

Make checks payable to:

DOUSMAN AREA CHAMBER OF COMMERCE
att: Dousman Farmer's Market
P.O. Box 2
Dousman, WI. 53118

Jane Pennycuff 262-719-0157

Vendor Information

If vendor does not have a Wisconsin seller permit number and claims their sales are tax exempt enter exemption code number provided by vendor.

1. Exempt sales only or display only
2. Multi-level marketing company pays sales tax
3. Non profit occasional sales exemption
4. Exempt occasional sales

Wisconsin Sellers permit number (15 digits starting with 456) 456_____
SSN (last 4 didgets)_____ FEIN (last 4 didgets)_____Exemption Code_____