



Market Contact:
ecoffman@hudsonville.org
(616) 669-0200
www.terrasquare.com

Market Location:
3380 Chicago Drive,
Hudsonville, MI 49426

2025 Hudsonville Farmers Market Application

Wednesdays: June 4 to September 24 | 9:00 am – 1:00 pm

Business Name: _____

Contact Name: _____

Address: _____

City/State/Zip: _____

Phone: _____ Email: _____

Spaces Needed (Maximum of 3): _____
space

Annual Vendor: **Covered Outdoor Space:** \$175 / season per space
 Uncovered Outdoor Space: \$100 / season per space
 Indoor Spaces: \$175 / season per space

Daily Vendor: Please check the boxes for dates **you are** attending. Rate: \$15 per day

- | | | | |
|----------------------------------|----------------------------------|------------------------------------|---|
| <input type="checkbox"/> June 4 | <input type="checkbox"/> July 2 | <input type="checkbox"/> August 6 | <input type="checkbox"/> September 3 |
| <input type="checkbox"/> June 11 | <input type="checkbox"/> July 9 | <input type="checkbox"/> August 13 | <input type="checkbox"/> September 10 |
| <input type="checkbox"/> June 18 | <input type="checkbox"/> July 16 | <input type="checkbox"/> August 20 | <input type="checkbox"/> September 17 |
| <input type="checkbox"/> June 25 | <input type="checkbox"/> July 23 | <input type="checkbox"/> August 27 | <input type="checkbox"/> September 24 (Last Market) |
| | <input type="checkbox"/> July 30 | | |

Equipment requested (Not Guaranteed/Limited Availability - included in cost): Electrical Connection

Products Selling: _____

Returning Vendor Use Only:

No change to ACH form on file - *Disclaimer: I understand that the ACH form on file will be used for future payment purposes.*

(Signature)

Office Use Only:

ACH form received

Booth Space(s): _____

Amount: _____

Date Paid: _____

Return the completed form to: **City Hall at 3275 Central Blvd. Hudsonville, MI 49426** or Email: ecoffman@hudsonville.org

**ACH payments will drawn in May, 2025.*

CATEGORIES:

1. A mixture of vendors will be carefully monitored by the Market Manager who can also limit the number of vendors per category.
2. 80% of the seasonal volume shall be of their own production. Please note that if less than 90% of a grower's own production, the Michigan Department of Agriculture requires a Food Establishment license. Forms are available from the Michigan Department of Agriculture at (616) 356-0600.
3. Crafter's shall sell homemade goods of which 60% is of their own design. Manufactured products are prohibited.

Categories represented can include, but are not limited to:

- Vegetables
- Fruit
- Herbs
- Condiments (jam, honey, butter, dip mixes, salsa, barbeque sauce, spices, hummus, syrup, spreads, sauces, etc.)
- Baked Goods
- Meat (frozen, fresh, jerky)
- Milk/Cheese/Ice Cream
- Eggs
- Beverages (coffee, cider, beer/wine, tea/espresso)
- Flowers/Plants/Cut Flowers
- Dry Goods (beans, pastas)
- Ready to Eat Foods
- Snacks (granola, chocolate, kettle corn, pretzels, popcorn, dips)
- Home Goods

Insurance:

Growers and Food Vendors, who do not fall under Michigan Cottage Food Law, are required to provide General Liability Insurance and Product Insurance, listing the City of Hudsonville as additionally insured in the amount of at least \$500,000 per occurrence and the annual aggregate.

I understand that by submitting this application for the 2025 Hudsonville Farmers Market, we hereby release the City of Hudsonville from any liability or responsibility for any injuries or damages that result from our participation in the market. I further understand that the City of Hudsonville is not responsible for lost or stolen goods or damages.

The undersigned, all my representatives and I agree to abide by the rules which I have reviewed.

Signature:

Date:

Print Name: