



**DOWNTOWN LEE'S SUMMIT MAIN STREET, INC.**

**Farmers Market Registration Form**

Please complete and return to:  
Downtown Lee's Summit Main Street  
P.O. Box 1688, Lee's Summit, MO 64063  
P: (816) 246-6598 F: (816) 246-7433



NAME \_\_\_\_\_ FARM NAME \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

E-MAIL \_\_\_\_\_ MONTHS YOU WILL BE SELLING \_\_\_\_\_

NAMES OF OTHERS AUTHORIZED TO SELL YOUR PRODUCTS ON YOUR BEHALF: (limit of 5) \_\_\_\_\_

PRODUCT/PRODUCE BEING SOLD \_\_\_\_\_

IF YOU'RE SELLING PRODUCE, PLEASE FILL IN THE FOLLOWING PERCENTAGES TO THE BEST OF YOUR KNOWLEDGE:

\_\_\_\_\_% OF YOUR PRODUCE THAT IS HOMEGROWN BY YOU AND/OR YOUR STAFF ON YOUR PROPERTY

\_\_\_\_\_% OF YOUR PRODUCE THAT IS LOCALLY GROWN WITHIN 150 MILES OF LEE'S SUMMIT

ADDRESS & DIRECTIONS FROM DOWNTOWN LEE'S SUMMIT TO THE FARM/FIELD WHERE THE PRODUCE IS GROWN

**COST OF SPACE:**     Saturdays during season: \$150.00     Wednesdays during season: \$150.00

Daily Rate: \$35.00    Date: \_\_\_\_\_    Circle: Wednesday or Saturday

**Please check if applicable:**

I am a vendor who participated in the 2009 market.

I would like to reserve the same space(s).     I would like to change spaces. Specify: \_\_\_\_\_

I am a new vendor in the Downtown Lee's Summit Farmers Market.

I have enclosed my check in the amount of \$\_\_\_\_\_ (Make checks payable to DLSMS or contact to pay by credit card)

**AGREEMENT**

I acknowledge that: (1) I desire to participate in the Farmers Market Program, (2) I will be assigned a place to park my vehicle(s) to display and sell my products, and (3) that all produce, etc. listed above is grown within 150 miles of Lee's Summit, Missouri. In consideration of the foregoing, I agree that: (1) I have received and will abide by the Rules of Operation; (2) I will be responsible for and will pay for any personal injuries, property damage or cleanup costs caused by my activities or anyone helping me; (3) the City of Lee's Summit and Downtown Lee's Summit Main Street, Inc., will not be responsible for my personal injuries or property damage that is caused by me or anyone helping me; and (4) further agree to pay any claims against the City of Lee's Summit or Downtown Lee's Summit Main Street, Inc., for personal injuries which are the fault of myself or anyone helping me (this includes the costs of any lawsuits, out-of-pocket expenses and attorneys fees). I will not be responsible for any liability that is not caused by my activities or anyone helping me.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

ACCEPTED:

\_\_\_\_\_  
Date

\_\_\_\_\_  
Main Street Representative

**FOR OFFICE USE ONLY**

SPACE #(S) \_\_\_\_\_

◇ CHECK # \_\_\_\_\_

◇ CASH

DATE REC'D \_\_\_\_\_