

## **Makers Market Vendor Application** Sunday, November 24 | 12 p.m. - 5 p.m.

Name of Applicant	Business Name
Type of Vendor	Website/Social Media Site
Address	City, State & Postal Code
Telephone	Contact Email
How many 10' x 10' spaces do you need (\$25 a space)?	One Two
Do you need electricity? Yes No	
Brief description of goods:	
Please email completed application and three images that missy.smith@polkcountyiowa.gov. If accepted, we will cor	
Please note: there are a limited number of vendor spaces available goods.	. We try our best to keep a good variety of offered
Agreement terms: My items are made by hand, grown or created by meI understand that this is a juried market and your applicationAll food vendors must maintain appropriate Health Depart and federal laws regarding food safety and have permits avenust comply with Polk County Health Department regulation	ment certification and adhere to all local, state, ailable. All prepared food processor facilities
Signature	