Grand Haven Farmers Market
Spring Lake Farm & Garden Market
Vendor Interest Form

Mission Statement: The Grand Haven Farmers Market and the Spring Lake Farm & Garden Market are managed by The Chamber of Commerce Grand Haven, Spring Lake, Ferrysburg to provide farmers and small business owners an opportunity to sell their fresh, Michigan grown and/or produced foods directly to customers. The Market will act as the community gathering place to educate and encourage healthy living within our communities.

MAIN CONTACT/FARM INFORMATION

Business/Farm Name: ________________________________
Primary Contact Name: ________________________________
Address: ____________________________________________ City: __________________ Zip: __________
Telephone: ____________________________ Cell: __________________________
Email: ____________________________________________
Website Address: __________________________________

MARKET ATTENDANCE

*Check an option under each Market that best describes your interest

Grand Haven Farmers Market (Wednesdays & Saturdays, 8am—1pm)
- Seasonal Vendor ($260.00—$410.00 based on availability)
- Daily Vendor ($25.00 based on availability)
- Not interested in this Market

Spring Lake Farm & Garden Market (Thursdays, 9am—2pm)
- Seasonal Vendor ($200.00 based on availability)
- Not interested in this Market

Please select a category that best identifies your business

- Grower—100% grown by your farm
- Producer—Michigan prepared/processed foods
- Retailer - Michigan products grown or produced by another business

What Michigan grown and/or Michigan processed foods do you wish to sell at the Market?

*Please keep in mind, our Market does not allow cottage food products.

___________________________________________________________________________________________________
___________________________________________________________________________________________________

Do you have the proper licensing from the State of Michigan? Please list the license number(s) below:

___________________________________________________________________________________________________

Signature: ____________________________________________ Date: ________________________________

Please submit this form to The Chamber of Commerce for consideration and we will contact you if our Market will be able to include your products this season or email eholman@grandhavenchamber.org