



VENDOR APPLICATION 2023



Business Name _____ Retail Tax ID (if applicable) _____
 Business Address _____ City _____ State _____ Zip _____
 Contact Name _____ Business Phone _____
 Contact Phone (Cell or Home) _____ Email _____
 Name of person/people who will be staffing the booth _____

VENDOR FEES

FULL SEASON - 17 market dates, 10'x16' booth space*

- \$245 Early Bird Savings Fee** (application received between January 1 - April 1)
- \$375 Regular Fee** (application received after April 1)

**Vendors may request up to two spaces*

PART TIME - 1-8 market dates, 10'x16' booth space

- \$30/daily**

Number of Spaces Requested _____

Total Amount Due _____

I need to bring a generator for my product

I am Certified Organic Yes No

CIRCLE ALL DATES THAT YOU WILL ATTEND

2023 OSWEGO COUNTRY MARKET

JUNE	JULY	AUGUST	SEPTEMBER
4 ★	2	6 🍷	3
11	9	13	10
18 🌻	16	20	17
25	23	27	24 ★
	30		

★ Opening/Closing Day 🍷 PrairieFest Parade
 🌻 National Farmers Market Week

Payment - Credit Card

I authorize the Oswegoland Park District to charge my credit card upon acceptance into the Oswego Country Market and understand this fee is non-refundable. Accepted card types include Mastercard, Visa, Discover, & American Express.

Card Number _____ Expires ____/____

Name on Card _____ CVV _____

How many years have you been participating at the Oswego Country Market? _____

Please list other markets where you sell _____

PRODUCTS

Submit a detailed list of all products to be sold with this application, indicating the crops/products you plan to grow or produce for sale at the market. This itemized list is important for us to monitor product availability and market saturation. (Attach a separate list if necessary)

NEW POTENTIAL VENDORS - Include a detailed description of set up and/or pictures of the set up.

HOLD HARMLESS AND INDEMNIFICATION

Vendor agrees that neither the Oswegoland Park District, nor the Janet H. Tripp Living Trust dated 07/14/1998, Janet H. Tripp Trustee, Robert W. Tripp Trustee, P.O. Box 699, Oswego IL, nor Gregory L. and Joan Kaleel, nor any public or private property owner whose property is utilized by the Market shall be liable for injury to the Vendor's business or any loss of income therefrom, or for personal injury or damage to the property of the Vendor, its employees, invitees, customers or any other person in or around the Vendor's section, regardless of whether the injury or damage results from conditions arising from other sources or places (including, but not limited to, weather conditions, power outages, or other similar occurrences) and regardless of whether the cause or means of repairing the conditions is inaccessible to the Vendor. Vendor further agrees that neither the Oswegoland Park District, nor the Janet H. Tripp Living Trust dated 07/14/1998, Janet H. Tripp Trustee, Robert W. Tripp Trustee, P.O. Box 699, Oswego IL, nor Gregory L. and Joan Kaleel, nor any other public or private owner whose property is utilized for the event, shall be liable for any damages arising directly or indirectly from any act or omission of event sponsors or any customer at the event.

To the fullest extent permitted by law, the Vendor shall indemnify, keep safe and hold harmless the Oswegoland Park District and its agents, officers and employees and any other public or private property owner whose property is utilized for the event, against all injuries, deaths, losses, damages, claims, suits, liabilities, judgements, costs, and expenses, which may arise directly or indirectly from any negligence or reckless or willful misconduct of the Vendor, its employees or agents. The Vendor shall, at its own expense, appear, defend, and pay all charges of attorneys and all costs and other expenses arising therefrom or incurred in connection therewith. If any judgement shall be rendered against the Oswegoland Park District or any other property owner in any such action, the Vendor shall, at its own expense, satisfy and discharge the same.

I hereby affirm that I have read and understand the Hold Harmless and Indemnification and agree to the terms expressed therein.

→ Signature _____ Date _____

VENDOR AGREEMENT

Your initials and signature below indicate that you agree to the following:

_____ I have received, read, and will comply with the Oswego Country Market Rules and Regulations

_____ I understand that I will be responsible for additional fees if I do not comply with the Oswego Country Market Rules and Regulations.

_____ I understand that I need to provide proof of liability insurance that insures my activity as a vendor at the Oswego Country Market. The Oswegoland Park District will be named as additional insured.

_____ I will accept Oswego Country Market LINK tokens for any and all eligible products, and will comply with all additional rules and regulations regarding SNAP/LINK.

_____ I will provide all necessary permits and supporting documentation.

→ Signature: _____

The Oswegoland Park District reserves the right to approve, disapprove, or dismiss any vendor at its discretion. Food vendors must contact the Kendall County Health Department at 630.553.8096 or environmental_health@co.kendall.il.us. If a **permit or license is required, it must be provided to the Market Manager prior to participation in the market.** Return your application, payment, checks payable to the Oswegoland Park District, with your **Certificate of Insurance**, and other permits/documentation to: *Oswego Country Market, Oswegoland Park District, 313 E Washington Street, Oswego, IL 60543.* Questions? Email Cori at oswegocountrymarket@oswegolandpd.org or call 630.554.4433.

For Oswegoland Park District Office Use:	Date Received	Initial
Vendor Application		
Payment		
Certificate of Insurance		
Health Dept Permit		
In-Store Parking Permit Application (optional)		

Approved _____

Declined _____



IN-STALL PARKING PERMIT APPLICATION 2023 (OPTIONAL)



Business Name _____

Name of person/people who will be staffing the booth _____

IN-STALL PARKING FEES

FULL SEASON - Available only to season vendors

- \$39** - vehicles less than 18 ft. long
- \$59** - vehicles 18 ft. or longer
- \$39** - any vehicle belonging to a vendor paying for 2+ booth spaces

PART TIME - Available only if space permits

- \$10/daily**

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☞ National Farmers Market Week

Total Amount Enclosed _____

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VEHICLE TYPE

Vehicle type, size, and picture are all REQUIRED for application to be considered.

For food trucks:

Which side of the vehicle do you serve from?

- Driver's Side
- Passenger's Side

Car Van Truck Other _____ Make: _____ Model: _____

Size* (in feet) _____ X _____
(length x width)

I have attached a picture of the vehicle

Describe the purpose and necessity of the vehicle parked in the stall.

➔ **SIGNATURE:** _____

Print Name: _____ Date: _____

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Return your application and payment (checks payable to Oswegoland Park District) to:

Oswego Country Market, Oswegoland Park District, 313 E Washington Street, Oswego, IL 60543.

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