

Applications accepted on a rolling basis at Manager's discretion and until full

Village of Brockport Farmers Market
2026 Season Application and Contract
Approved by the Village Board 04/27/2026

Thanks for your interest in being a vendor at the Village of Brockport Farmers Market.
Mandatory pre-season meeting for vendors. Details to be provided.

Please provide information requested in this document and submit it to:

Email: cammanacres@gmail.com **or**
Attention: Shane Camman

Attn: Farmers Market Manager
Village of Brockport
127 Main Street
Brockport, NY 14420

Farm name _____

Contact name _____

Address _____

Cell Phone (____) _____ — _____ **Required**

Email _____ **Required**

Farm address _____

Sales tax ID _____

Market Space Rental

2026 Season Rate: \$250.00 each space

2026 Daily Rate: \$ 40.00 each space

Each market space is approximately 10' square (approximately 100 square feet). This non-transferable fee is due at the time this contract is signed. Non-payment may result in forfeiture of market privileges.

How many market spaces are you requesting to rent? ____

Do you intend to attend the market for the full season? Yes No

If you answered "No" to the question above, please indicate below the dates (months and days) on which you will start and finish attending:

Start ____ / ____ Finish ____ / ____

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The Village of Brockport encourages you to participate in the Farmers Market Nutrition Program (FMNP) so that you will be eligible to accept FMNP coupons for produce. Please indicate if you will participate in FMNP: Yes No

Crop Plan

List crops grown that you plan to sell at the Village of Brockport Farmers Market, and the acreage of each:

Crop	Acreage	Crop	Acreage
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

List below any additional products you plan to sell, as allowed by the Village of Brockport Farmers Market Rules & Regulations:

Item for Sale	Farm/Business that Produced Item
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

*** Please include a copy of a certificate of liability insurance. ***

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Affirmation and Agreement

I hereby affirm that I understand this Village of Brockport Farmers Market 2026 Season Application and Contract, and that I agree to be bound by and comply with the terms and conditions set forth herein.

I verify that the information I have provided in this Village of Brockport Farmers Market 2026 Season Application and Contract is complete, true, and accurate to the best of my knowledge.

I hereby affirm that I read and understand the Village of Brockport Farmers Market Rules & Regulations, and that I agree to be bound by and comply with the terms and conditions set forth therein.

I have attached herewith copies of all licenses and/or permits necessary to the type of products I plan to sell.

I agree to save, hold harmless, and indemnify the Village of Brockport, its representatives, officers, employees, volunteers, agents, assigns and designees from any and all liability for my death, disability, personal injury, property damage, property theft or actions of any kind which hereafter may accrue to me as a result of my participation as a vendor at the Village of Brockport Farmers Market.

In the event that any claim, liability or loss against the Village of Brockport caused by my sales at the Village of Brockport Farmers Market is not paid in full by liability insurance in force and effect, I hereby indemnify, save, and hold harmless the Village of Brockport, its representatives, officers, employees, volunteers, agents, assigns and designees from any and all liability or loss, including settlement expenses, litigation costs, and attorney’s fees, arising out of product sales at the Village of Brockport Farmers Market. In the event of any claim, liability, or loss, I shall pay the indemnification amount to the Village of Brockport upon written demand from the same.

Vendor’s name (please print)

Vendor’s signature

____/____/____
Date