



EASTER MARKET VENDOR APPLICATION

DOUBLE-CLICK OR DOUBLE-TAP TO EDIT

Thank you for your interest in becoming a vendor at our Easter Market! Please complete the following application to be considered. Ensure all information is accurate and complete.

Basic Contact Information

Vendor/Business Name: _____

Contact Person: _____

Phone Number: _____

Email Address: _____

Mailing Address: _____

Type of Vendor

Type of Products Being Sold (e.g., produce, handmade items, food, resale):

Brief Description of Products or Services:

Booth/Space Needs

Indoor or Outdoor Preference:

- Indoor Outdoor

Number of Spots Desired:

Size Requirements for Outdoor Booths (if needed):

Business/License Info

Do you have a business license?

- Yes No

Are you selling resale items?

- Yes No

Event Logistics

Arrival/Setup Time Acknowledgment:

Setup begins at 8:00 AM and must be completed by 9:00 AM.

- I acknowledge the arrival/setup time.

Vendor Supplies Acknowledgment:

Vendors must bring their own tables and chairs.

- I acknowledge that I must bring my own tables and chairs.

Vendor Acknowledgment

Vendors are responsible for their own items and property. The Park is not responsible for accidents, theft, or damage.

I acknowledge and agree to the above statement.

Signature: _____

Date: _____

Please submit this completed application to DMeyers@PalmyraMO.gov or ETHompson@PalmyraMO.gov.

We look forward to reviewing your application!