



# Vendor Registration Form

## 2025 Season

### May 24 - November 22

Vendor Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State : \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Check here if you are you signing up for:

Whole Season \_\_\_\_\_ Half Season \_\_\_\_\_ Part Time \_\_\_\_\_

- We urge everybody to participate in Opening Day on May 24th!

Will you accept food stamps? Yes \_\_\_\_\_ No \_\_\_\_\_ WIC Coupons? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you a certified organic grower? Yes \_\_\_\_\_ No \_\_\_\_\_

What size/type of vehicle will you be bringing to the Market? \_\_\_\_\_

List type of products you will be selling at the Market: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Registration Fee: Full Season: \$525.00 (Deposit of \$200.00)**

**Half Season: \$325.00 (Deposit of \$100.00)**

**Deposit due by April 14, with the balance due by June 7.**

- Vendors that are part time will pay \$30 each week that they attend. Advance reservations are necessary.
- Any special fee arrangements must be made with the Treasurer, Pennington Farmers Market. All fees are non-refundable

(Make check out to "Pennington Farmers Market") TOTAL ENCLOSED \$ \_\_\_\_\_

I, \_\_\_\_\_, am an authorized representative of the Vendor named above and have authority by the Vendor to enter into this contract. I have received and read the 2025 Guidelines and Policies for the Pennington Farmers Market and understand that the Vendor's participation in the Market is subject to these. Vendor agrees to comply with these Policies as well as all Federal, State and local laws, especially those relating to health, safety and labor standards.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

**Mail application, fees, and insurance documents to:**  
**Pennington Farmers Market**  
**PO Box 920**  
**Pennington, NJ 08534**

For more information, contact:  
Kathleen Lauricella, Vendor Coordinator  
PFMmanager@gmail.com  
(609) 647-4794

Joann Held, Board of Trustees  
PenningtonFarmersMarket@gmail.com  
(609) 306-1483

**Addresses for use in Insurance**

Pennington Farmers Market  
PO Box 920  
Pennington, NJ 08534

Rosedale Town & Country  
101 Route 31 North  
Pennington, NJ 08534

Hopewell Township  
201 Washington Crossing - Pennington Road  
Titusville, NJ 08560