

2023 Farmers Market Application



Please fill out the application and turn in at the Wells Area Chamber of Commerce with payment.

Mailing Address: Wells Area Chamber of Commerce • PO Box 134 • Wells, MN 56097

VENDOR INFORMATION:

Business Name: _____

Contact: _____

Address: _____ City: _____

State: _____ Zip: _____ Email: _____

Phone Number: _____

Emergency Contact: _____

Phone: _____

Website: _____

Facebook: _____

Category (check all that apply)

Fruits/Vegetables

Prepared Foods Plants/Flowers

Candy/Confections Baked Goods

Other: _____

COST: \$30/season or \$5/day - Check one: Season Day(s) - specify date(s)

MARKETING: If you've provided a website or facebook information about your business, we will be happy to post it on the Chamber website (www.WellsAreaChamber.com)

Would you like your information posted to our website and/or Facebook?

Y N

Business Name (please print):

Business Representative (please print): _____

VENDOR SIGNATURE _____

Date: _____

Office Use Only:

Payment Method: _____

Ref #: _____

Date: _____

THANK YOU FOR SUPPORTING THE MARKET!