

Gooding Farmer's Market Application
2024

Name: _____

Business Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-Mail: _____

Idaho Tax Number: _____

You will be responsible for collecting and reporting your own sales taxes. EVERYONE is responsible for registering the market as an event, whether you have a permit or needing a temporary Permit. Event numbers can be found on the GFM website.

www.goodingfarmersmarket.com

What will you be Selling? Please provide a description that would work well as a bio for your business on our website.

Do you need to use a trailer? Y/N Do you need any other special considerations?

Will you be reselling any items Y/N If yes what are those items _____

Have you read, agree with and are able to abide by the rules of the Market? (If you need a copy please visit www.goodingfarmersmarket.com)

_____ Yes

By signing below, I agree to hold the Gooding Farmer's Market, Idaho Deaf and Blind State School,, the city and county of Gooding, and it's contractors and employees, harmless for any responsibility or liability, and from any and all bodily injury claims, demands, damages, costs, expense actions and cause of action arising from any act or occurrence as a result of participating in the Gooding Farmer's Market in Gooding, Idaho.

Signature

Date

Please Submit completed application to the Gooding Farmer's Market, 1776 S. 2050 E.
Gooding ID 83330 or to melsturm77@gmail.com.