

Hickory County Farmers' Market Membership Weekend Application

Name \_\_\_\_\_

Address \_\_\_\_\_

E-mail Address \_\_\_\_\_

Phone #s: Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Produce or Products: \_\_\_\_\_

Amount Paid

Annual membership dues \$20. \_\_\_\_\_

Weekend Rate (includes electric)\$30 \_\_\_\_\_

Hold-Harmless Agreement

By signing this application participant agrees to hold blameless the HCFM board, sponsors, committees and each officer, director, member, manager, agent or employee from any and all loss, liability, injury or damage occurring from participation in any market event.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date of Application

\_\_\_\_\_  
Signature of Market Manager or Officer