

K ANKAKEE FARMERS' MARKET
2018 Season Affidavit

I, _____ hereby agree to

(enter the name of the company's responsible party)

sell or offer for sale at the Kankakee Farmers' Market only such items as listed on my application form. Further, I will acknowledge full responsibility for all activities conducted through the term of this seasonal market, abide by the market rules and regulations, and agree to hold harmless the City of Kankakee and/or section and departments therefore, and indemnify the City of Kankakee and its sections for any and all claims arising under this permit.

Signature of Applicant: _____

Company Name: _____

Address: _____ City: _____ State: _____ Zip code: _____

Primary Phone: _____ Fax Number: _____

E-Mail: _____

Please mail fees, completed affidavit, application, and any forms to:

Kankakee Farmers' Market

Attn: Sarah Vinardi

In care of: Lori Anderson

200 E. Court Street, Suite 502

Kankakee, IL. 60901

Please Make Checks Payable to **Kankakee Farmers' Market**

