



City of Barnwell Farmers' Market

## PARTICIPATION AGREEMENT



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

Farm Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City & County: \_\_\_\_\_ State & Zip Code: \_\_\_\_\_

Phone Numbers: \_\_\_\_\_ Email Address: \_\_\_\_\_

I have read, understand and agree to abide by the City of Barnwell Farmers' Market Rules and Regulations. I have read, understand and agree to comply with items listed under General Information.

I understand that violations of the Rules and Regulations may be grounds for suspension or expulsion from the Market. I understand that the City of Barnwell Director of Parks and Recreation or the Market Manager can revoke selling privileges.

Participants must have an Approved Application, Emergency Notification Form, any applicable DHEC certifications, and product list on file with the Market Manager prior to participating at the Market.

\*I understand that I cannot legally sell any food products which are produced off-site which have not been labeled, processed and prepared in compliance with the South Carolina Food and Cosmetic Act or other appropriate Regulations. You may contact the South Carolina Department of Agriculture/Food and Cosmetic Section at (803) 737-9690 with any questions you might have about this section. **\*(effective 2014)**

I understand that the City of Barnwell recommends that I carry my own liability insurance while participating in the Barnwell Farmers' Market.

I hereby release, jointly and severally, the City of Barnwell Parks and Recreation Department, City of Barnwell, its officers, employees, agents, and staff members from any losses, claims, damages, or lawsuits arising from my use of the Barnwell Farmers' Market by myself or my workers.

\*Further – The City of Barnwell, Barnwell Parks and Recreation, its agents and employees, shall not be liable to me, or any other person on these premises, during the term of this Agreement, for injury to, damage to, or loss of, property or any person on these premises. I further agree to indemnify the City of Barnwell and Parks and Recreation Department and hold them harmless from all damages, injuries, liabilities, losses, and expenses incurred by myself in any way from the use of these premises. I also release the City of Barnwell and the Parks and Recreation Department and its agents and employees from all damages, injuries, liabilities, losses, and expenses incurred by myself in any way from the use of these premises and equipment. I also agree to indemnify the City of Barnwell and the Barnwell Parks and Recreation Department against all costs, including attorney's fees, arising out of my use of this property and these premises.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Received by Market Manager on \_\_\_\_\_



## Farmers' Market Application

Participant's Name: \_\_\_\_\_

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

City and County \_\_\_\_\_

State and Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Category:

- \_\_\_\_\_ (1) Barnwell County Farmer/Grower  
\_\_\_\_\_ (2) South Carolina Farmer/Grower  
\_\_\_\_\_ (3) \*Barnwell County Resident, Artisan or Crafter *\*(effective 2014)*

### In Case of Emergency Notify

Name (Contact 1): \_\_\_\_\_

Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

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

Name (Contact 2): \_\_\_\_\_

Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

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

Staff Approval: \_\_\_\_\_ Date: \_\_\_\_\_

The original of this form will be kept on file at City Hall.  
A copy of this form will be kept at the Farmers' Market

