



Contact: Randy Chambers
Time: 9:00 a.m. – 12:30 p.m.
Tifton-Tift County Main Street Program

Here is all of the information that you will need to get started!

Fees: Vendor space is currently free.

Schedule: Vendors can sign up for a specific Saturday, such as the 2nd Saturday of each month or the 1st and 3rd Saturdays; or, for a month or the whole season! Knowing your schedule allows us to promote the vendors who will be in attendance each week.

Promotion: Weekly e-newsletter, Facebook, articles to paper, banners downtown, posters, fliers, tent cards, local television and more.

Booth Size: 10' x 12' Booth space locations are selected based on order of applications received. We do have a few tents and tables. However we encourage vendors to supply their own tables & chairs.

Note: There will not be a power or water source for vendors.

Set up Time: Vendors should be set up by **8:30 a.m.** Vehicles are allowed next to depot for unloading only. Vehicles should be relocated to one of several lots in downtown during market hours.

Ordinances: All produce / concessions must be kept clean and sanitary at all times. Smoking is not allowed in this area. All demonstration food vendors are required to have a working fire extinguisher at their booth.

Only booths with an approved application will be permitted.

VENDOR APPLICATION: Type of vendor: Arts & Crafts or Produce (Circle One)

Business Name: _____ Primary Contact Name: _____

Address: _____

Phone: _____ Fax: _____ Email Address: _____

Have you participated in the Tifton Farmers Market before? Yes or No If yes, how many years? ____

Have you participated in other area Farmers Markets before? Yes or No If yes, how many years? ____

List all of the items you wish to sell:

I understand that neither Main Street Program, Downtown Development Authority nor the City of Tifton is responsible for loss or damage of work, personal injuries or property damage; nor will the vendor / company be a party to legal action against them. I have read the rules and regulations and agree to abide by them.

Signature _____ Title: _____ Date: _____

Please fax, scan/email or mail this form to:

Mail: 504 Main Street Tifton GA 31794

Phone: (229) 556-7439 or 391-3966

Fax: 229.556-6201