Please return the completed application, and registration fee to:

City of Johnstown

Attention: Sara Williams

401 Main Street

Johnstown, PA 15901

Should you have any questions, please contact Sara Williams at [Swilliams@johnstownpa.gov](mailto:Swilliams@johnstownpa.gov) or

(814) 539-2504 Ext.102.

**The application deadline is May 2nd, 2025.**

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| **Farm/Business Name** |
| Website address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Facebook Handle: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Instagram Handle: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **Applicant First Name** | **MI** | **Last Name** | | **Suffix** |
|  |  |  | |  |
| **Contact Information** | | | | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| **Email (Required)** | | | **Phone** | |

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| **Mailing Address (Street)** | | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **City** | **State** | **Zip** |

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| **Will require electricity at the Market for the production of your product or food safety purposes?** | |
| **Yes:\_\_\_\_\_\_\_\_\_** | **No:\_\_\_\_\_\_\_\_\_** |
| **NOTE: Electric spaces are limited and will be assigned based on the needs of the market organizers.** | |

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| Please check which category of goods you will primarily sell. | |
| Produce:\_\_\_\_\_\_\_\_\_ | Flowers:\_\_\_\_\_\_\_\_\_ |
| Cheese:\_\_\_\_\_\_\_\_\_ | Herbs/Relishes:\_\_\_\_\_\_\_\_\_ |
| Meats:\_\_\_\_\_\_\_\_\_ | Soaps/Lotions/Candles:\_\_\_\_\_\_\_\_\_ |
| Baked Goods:\_\_\_\_\_\_\_\_\_ | Jams/Jellies:\_\_\_\_\_\_\_\_\_ |
| Hot Foods:\_\_\_\_\_\_\_\_\_ | Ice-cream:\_\_\_\_\_\_\_\_\_  Food Truck: \_\_\_\_\_\_ |
| Drinks:\_\_\_\_\_\_\_\_\_ | Other:\_\_\_\_\_\_\_\_\_ |

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| Are you are certified to accept PA Department of Agriculture produce vouchers? | |
| Yes:\_\_\_\_\_\_\_\_\_ | No:\_\_\_\_\_\_\_\_\_ |

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| List all goods to be sold at the market: |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **NOTE: If you plan to sell goods that are not produced by you and you are not an existing city business, you will be required to get a City of Johnstown vendor license.** |

T Shirt Size (Adult) \_\_\_\_\_\_\_\_\_

**Voluntary**

The Johnstown Farmers Market strives to be inclusive and create opportunities for all. The questions below are for the purpose of monitoring market diversity over time, tracking effectiveness of our recruiting efforts and ensuring that our market is representative of the community. Please indicate if you/your business fits into any of the following (optional):

**\_\_\_\_\_** BIPOC (Black, Indigenous and People of Color)

\_\_\_\_\_ Owner, manger or staff identifying as having a disability or being disabled

\_\_\_\_\_ Immigrant or refugee owned or managed

\_\_\_\_\_ LGBTQIA+ owned or managed

\_\_\_\_\_ Veteran-owned or managed

\_\_\_\_\_ Business is < 1 year old

\_\_\_\_\_ Business has a social impact/mission component (beyond food access)

I am applying to be a vendor at the 2025 Downtown Johnstown Farmer’s Market. I agree to follow all the rules and regulations of the Market. I understand I will need to produce a copy of my completed Mercantile License, Indemnity Agreement, and any other required documents once accepted before I can participate in the market. I acknowledge that it is my sole responsibility to obtain any required license, permit, certificate, and/or certification.

*For vendors of prepared foods only:* I understand that I must contact the Pennsylvania Department of Agriculture to obtain appropriate licenses and approval of planned sanitation measures. I understand that this is an application only and vendor selection is at the sole discretion of the Johnstown Farmers Market.

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Signature Date