Hugo Farmers Market

Vendor Registration

Name:		Date:			
Address:					
Street		City	State	Zip	County
Farm/Organization Name:					
Telephone:		Mobile:			
E-Mail:		# of Stalls Requested:			
<u>De</u>	tailed list of ite	ems to be sold	at the Farme	<u>rs Market</u>	
Farmers Market. I do not hold the City of Hugo personal injury that either my financial liability for my action I further agree to indemnify, all claims and actions for injurincluding court cost and attor	y representative or ns and all products defend and hold ha ry, damage, or loss ney's fees, related	I may incur while that either I or my armless the City of to personal or pro	selling at the Hug representatives Hugo, its officers operty or other lia	o Farmers Mark sell at the Hugo and agents fror bilities or exper	et. I accept full Farmers Market. m and against any and nses whatsoever,
in connection with the Hugo I give permission to Hugo Far		e my nhotogranh a	and/or video of m	vself and/or pro	nducts
		,	·		
PLEASE SIGN AND RETURN T	HIS DOCUMENT W	TIH ALL REQUIRE	DERTIFICATION	S, REGISTRATIC	INS OR LICENSES TO.
Registrants Signature					
Return application to: City of Hugo Attn: Farmers Market Manager 201 South 2nd					

Hugo, OK 74743