



## FARMERS' MARKET VENDOR APPLICATION 2026

Our mission at the Olde Dominion Agricultural Complex is “To promote and support regional agriculture while offering a community-based facility to educate and entertain.” We are a non-profit 501-c3 corporation dedicated to “Preserving the past, promoting the present and preparing for the future of agriculture.” The goal of our Farmers’ Market is to support local growers and crafters who produce quality goods and offer a venue where they, and the community, can come together in a mutually beneficial environment. This year the Farmer's Market will be held every Saturday from 8:00am - 12:00pm.

Although the vendors at the market operate their own individual booths and businesses, it is the cooperative effort of all vendors at the market that makes the market function smoothly and successfully for all involved.

Produce Vendor

Meat

Other

Producer/Vendor Name: \_\_\_\_\_

Farm/Business Name/ Trading As: \_\_\_\_\_

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

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

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

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

Facebook Page: \_\_\_\_\_

Website/ Other Social Media: \_\_\_\_\_

Products: \_\_\_\_\_

Planning to vend all season or only specific dates (please list the dates)? \_\_\_\_\_

- 
- Vendors must submit an application to Market management ([hmanley@theodac.com](mailto:hmanley@theodac.com))
  - We ask that all vendors agree to a 'no-smoking' policy. We understand that the market is held outdoors however for the health and safety of all vendors and guests we kindly ask that there be no smoking.
  - Applications may be modified or updated during the season.
  - Vendors are required to be set up 15 minutes before the market opens.
  - Booth space has no charge however we do ask that you let us know if you plan to set-up each week.
  - Scales/weights are the responsibility of the vendor and are subject to inspections by the Office of Weights and Measures.
  - Vendors will set their own prices and are encouraged to display prices and post their farm/business locations and ensure their products are accurately represented, i.e.: Virginia grown, Organic, etc.

(turn over)

Any behavior or conduct considered to be disruptive and detrimental, in the exclusive opinion of the Market Manager, to the peaceful operations of the Market, shall be grounds to require the vendor and any employees, agents, or guests, to leave the Market immediately and will result in the forfeiture of eligibility to be a participant in the Market in the future.

**It is the responsibility of each Food Producer to abide by all county, state, and federal regulations which govern the production, preparation, preservation, labeling, or safety of products offered for sale at the Market. It is the sole responsibility of each vendor to know and abide by the state of Virginia tax laws and regulations.**

**ALL APPLICANTS MUST ADHERE TO ALL HEALTH REQUIREMENTS, LICENSES, PERMITS AND FEES AS REQUIRED BY PITTSYLVANIA COUNTY AND/OR THE STATE OF VIRGINIA. THE HEALTH DEPARTMENT MAY BE CONTACTED BY CALLING: 434-432-7232.**

**Hold Harmless Cause**

**In consideration of participation in the Farmer’s Market offered by Olde Dominion Agricultural Foundation, I, the undersigned for myself and/or my representatives, agree to indemnify and hold the Olde Dominion Agricultural Foundation harmless and hereby waive, release and discharge any and all claims for damage, for death, personal injury, bodily injury (including illness and communicable disease) or property damage which I and/or my representatives may have or which hereinafter may accrue to me and/or my representatives against the Olde Dominion Agricultural Foundation, its employees, agents, and volunteers from and against any liability arising out of or connected in any way with my and/or my representatives participation in this market, even though that liability may arise out of active or passive negligence or carelessness on the part of the person or entities mentioned above. It is further understood and agreed that this waiver, release, and assumption of risks has been freely entered into and is to be binding on my/our heirs and assigns. Additionally, I fully understand that my participation in the above-referenced activity exposes me to the risk of personal injury, death, communicable diseases, illnesses, viruses, and/or property damage. Knowing the risks, nevertheless, I hereby acknowledge that I and/or my representatives, am voluntarily participating in this activity agree to assume those risks on behalf of me and/or my representatives and to release and to hold harmless all of the persons or entities mentioned above who (through negligence or carelessness) might otherwise be liable to me and/or my representatives(or my/our heirs or assigns) for damages.**

**SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_**

**PRINT: \_\_\_\_\_**

*Please submit your completed application form to [hmanley@theodac.com](mailto:hmanley@theodac.com)  
or mail to our office at 19783 US Hwy 29, Suite G, Chatham, VA 24531.*