



# Application for 2026 Membership

Please read the accompanying "Rules & Regulations."  
If mailing, send the completed form and check payment to:  
Emmett Farmers Market P.O. Box 875, Emmett, ID 83617  
Questions? Call or text (208) 506-8430

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

Farm/Business Name (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Website: Y \_\_\_ N \_\_\_

License Plate # & Description of vehicle driven to the market \_\_\_\_\_

Please describe the products or services you plan to offer for sale at the market:

\_\_\_\_\_  
\_\_\_\_\_

### Seasonal Membership Fee: (pick one):

Daily \$15/day: \_\_\_\_\_ or Early Bird (before May 15) \$60: \_\_\_\_\_ or Standard Fee (after May 15) \$75: \_\_\_\_\_ \$ \_\_\_\_\_

Need electricity? Y \_\_\_ N \_\_\_ Add \$30 for the season. Extension cords must be covered to prevent tripping hazards. \_\_\_\_\_

Total Due: \_\_\_\_\_

I'm setting up in Jun \_\_\_ Jul \_\_\_ Aug \_\_\_ Sep \_\_\_ Oct \_\_\_ on Wed. only \_\_\_ Sat. only \_\_\_ or Both Wed. & Sat \_\_\_

I plan to start on Wed. \_\_\_ Sat. \_\_\_ and plan to be at the market each week, except for the following days

\_\_\_\_\_  
\_\_\_\_\_

Indicate if you have a canopy with weights (no stakes allowed). Y \_\_\_ N \_\_\_ Putting up back or side panels? Y \_\_\_ N \_\_\_

\_\_\_\_\_ I acknowledge that I will not hold the EFM, its volunteers, the City of Emmett, or any of its representatives and employees liable for any damages resulting from the sale of my products or my presence at the market site.

\_\_\_\_\_ I consent to sell only those items that have been approved by the market management, as indicated. I acknowledge receipt of the EFM's Rules and Regulations. I confirm that I have read, understood, and agree to adhere to these rules and regulations, including any additional ones that may be established.

**Please note that changes have been made to the EFM Rules & Regulations for 2026!**

\_\_\_\_\_ Check if you agree to let the EFM use your likeness, name, business, or products in marketing to grow the EFM customer base.

\_\_\_\_\_ Confirm that you have successfully registered online for the Event ID with the Idaho State Tax Commission for the EFM Event. Event ID is on the EFM's website.

\_\_\_\_\_ Confirm that all copies of all applicable licenses, inspection certificates, and permits are included with your application.

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

(Your signature indicates your agreement to abide by the Rules & Regulations of the Emmett Farmers Market.)

### Office Use Only:

Payment Received by \_\_\_\_\_ Date \_\_\_\_\_ Check # \_\_\_\_\_ Cash Amt. \_\_\_\_\_ Placard? Y \_\_\_ N \_\_\_  
Total Amount Received \$ \_\_\_\_\_ Sales Receipt Written Y \_\_\_ N \_\_\_ Entered on Spreadsheet Y \_\_\_ N \_\_\_