

Vendor Registration

Business Name Vendor Name Vendor Assistant(s) Mailing Address Mobile Phone Number Other Contact Number Email				Street AcCity Mobile I	Name of all a ddress Phone ontact	assistants s Number Number		S	State	Zip Code
Products to be sold at the Aurora Marketplace										
Growin	ng Pract	tice:		Conventional		Natural (but NC	T org	janic)		Certified Organic
□ P	Plants			Flowers		Herbs		Fruits		Vegetables
□ E	Eggs			Honey		Meat		Dairy		
Processed Foods/Baked Goods * Youth Lemonade Stand *Must be in compliance with HEA 1309										
□ C	rafts	Afts Please Specify								
□ 0	Other	Please	e Specify							
This registration is effective upon signature by vendor and Market Director. All vendors are solely responsible for all claims, injuries and damages resulting from the sale of unsound and unsafe goods and/or their participation in the Aurora Marketplace. Vendor hereby agrees to indemnify, hold harmless, release, waive and forever discharge the City of Aurora, Indiana, its employees, agents and officers, and members of the Aurora Marketplace Advisory Committee, and Main Street Aurora for all bodily and personal injuries, including injuries resulting in death, and property damage, claims actions, liabilities and expenses, including reasonable attorney fees and court costs, which may occur as a result of vendor's participation in the Aurora Marketplace, whether or not sounding in tort or contract, and whether or not caused by a negligent act or omission of the City of Aurora, its employees, agents or officers. Aurora Marketplace Rules are subject to change. Vendors will be notified of any changes via E-mail. Vendor hereby affirms that he/she maintains all applicable licenses and permits required by law.										
	ad and und Vendor Sig		the Au	urora Marketplace Rules and I agree to abide by them.					Click	here to enter a date.
Parental Signature (if under 18)								Date Date	-	here to enter a date.
Market Di	irector 201	17	-					Date		here to enter a date.
Aurora Marketplace Main Street Aurora PO Box 156 Aurora, IN 47001 Make check payable to: Main Street Aurora PO Box 156									Main Street Aurora	
				For I	Main	Street Aurora	Use	Only		
□ P	Paid			Check	#			Cash	Dat	e