



2020 Agriculture Application Sonora Certified Farmers' Market

For office use only	
Application	<input type="checkbox"/>
Waiver	<input type="checkbox"/>
Certificate	<input type="checkbox"/>

PRODUCER'S NAME: _____

BUSINESS NAME: _____

MAILING ADDRESS: _____

PHONE #: HOME: _____ BUSINESS: _____

EMAIL ADDRESS: _____

LOCATION OF FARM: _____ COUNTY: _____

WILL YOU BE SELLING FOR ANOTHER CERTIFIED PRODUCER? YES ____ NO ____

IF YES, PRODUCERS NAME _____

NAMES OF SELLING EMPLOYEES (IF APPLICABLE)

NAMES AND RELATIONSHIP OF SELLING FAMILY MEMBERS:

HAVE YOU PREVIOUSLY SOLD AT THE SONORA MARKET? YES ____ NO ____

FOR RETURNING PARTICIPANTS. DO YOU HAVE ANY NEW ITEMS? YES ____ NO ____

IF YES, PLEASE

LIST _____

LIST OTHER MARKETS AT WHICH YOU SELL:

CERTIFIED PRODUCER'S #: _____ (Include Copy)

OTHER LICENSES, PERMITS, ETC.: _____ (Include Copy)

LIST CERTIFIED ITEM(S) YOU PLAN TO SELL AND WHEN (Use back if needed)

ITEM(S)	MONTH(S)	ITEM(S)	MONTH(S)	ITEM(S)	MONTH(S)

I request permission to sell at the Sonora Certified Farmers' Market. I have read the rules of the Market and agree to abide by these rules and all other laws, codes and regulations as amended. I also agree to cooperate with the Market management and to pay the required fees.

INDEMNITY/HOLD HARMLESS AGREEMENT:

Undersigned shall indemnify, defend, and hold harmless the City of Sonora (“City”), its officers, officials, employees, agents and volunteers (“City indemnitees”), from and against any and all causes of action, claims, liabilities, obligations, judgments, or damages, including reasonable legal counsels’ fees and costs of litigation (“claims”), arising out of the Undersigned’s performance of its obligations under this agreement or out of the operations conducted by Undersigned, except for such loss or damage arising from the sole negligence or willful misconduct of the City. In the event the City indemnitees are made a party to any action, lawsuit, or other adversarial proceeding arising from Undersigned’s performance of this agreement, the Undersigned shall provide a defense to the City indemnitees, or at the City’s option, reimburse the City indemnitees their costs of defense, including reasonable legal counsels’ fees, incurred in defense of such claims.

Producer’s Signature _____ Date _____

Approved by: City of Sonora _____ Date _____

**CITY OF SONORA
AGREEMENT, WAIVER AND RELEASE
City Facility Use**

Name of Event/Activity _____

Date of Event/Activity _____

I understand the risks involved by participating in the above event/activity of for which I/we are utilizing the City of Sonora's property, and in consideration for being permitted by the City of Sonora to participate in the above activity, I hereby waive, release and discharge any and all claims for damages for personal injury, death, or property damage which I may have, or which may hereafter accrue to me, as a result of participation in said event/activity. This release is intended to discharge in advance the City of Sonora (its officers, and/or officials, employees, volunteers and agents) from any and all liability arising out of or connected in any way with my participation in said event/activity, even though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above. It is understood that this event/activity of involves an element of risk and danger of accidents and knowing those risks I hereby assume those risks. It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns. I agree to indemnify and to hold the above persons and entities free and harmless from any loss, liability, damage, cost, or expense which they may incur as the result of my death or injury or property damage that I may sustain while participating in said activity.

Authorized Representative

(To be completed by individuals representing an Organization or Group)

I, _____, warrant that I am authorized to execute this Agreement, Waiver and
(Name of Individual)
Release on behalf of the _____ and the Organization/Group's individuals
(Organization/Group)
participating in this event/activity.

I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE CITY OF SONORA.

Participant

Date

Participant

Date

PARENTAL CONSENT: *(MUST be completed and signed by parent/guardian if applicant is under 18 years of age)* I hereby consent that my son/daughter participate in the above activity and I hereby execute the above Agreement, Waiver, and Release on his/her behalf. I state that said minor is physically able to participate in said activity. I hereby agree to indemnify and hold the persons and entities mentioned above free and harmless from any loss, liability, damage, cost, or expense which may incur as a result of the death or injury or property damage that said minor may sustain while participating in said activity.

I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE CITY OF SONORA.

Parent or Guardian

Date