



Please keep this page for your reference.

Overview: Atlanta Housing Authority's (AHA) five-year strategic plan, Vision 2022: *Live. Work. Thrive.*, broadens our vision beyond housing. With *Thrive* as one of our programmatic aims, AHA is introducing a Return to Community Market and Fair. Running from June – October, it will provide locally-grown and healthy foods and goods, health screenings from community caregivers, educational demonstrations and exposure, sustainability innovations, music and more—all fostering an environment and chance for UCN and other Westside residents to celebrate healthy living in their community

The project will be a partnership between AHA, corporate investors, the city of Atlanta and other community organizations located on Atlanta's Westside.

Market Location: The Market and Fair will be located in the heart of University Choice Neighborhood/UCN (Ashview Heights, Atlanta University Center and Vine City Neighborhoods) at: 137 Elm Street NW, Atlanta, GA 30314

Dates/Hours of Operation: The third Saturday of the month, beginning June 17th and running through October 21st.

Application Process: Acceptance to the AHA Return to Community Farmer's Market is for those growing or producing their own local product and is contingent upon approval by the AHA Return to Community Planning Committee. Applications must be fully completed, and all applicants must have approval for participation.

If your application is accepted, a member of the committee will notify you in a timely manner. To inquire about the status of your application, please contact **Ralph McDonald at (404) 817-7384**.

Send your completed application form, including the signed waiver and all required attachments by email to: ralph.macdonald@atlantahousing.org.

Absence: Vendors are expected to all the market dates indicated on their applications and have been approved for. Therefore, if a vendor is unable to attend a market, 72 hours' notice of cancellation via email is required. (Call and in-person cancellations are not considered notice.)

2017 AHA Return to Community Farmer's Market & Fair Vendor Application

Vendor/Booth Name: _____

Contact Name: _____ Cell: _____ Bus. Phone: _____

Email Address: _____ Website Address: _____

Mailing Address: _____

Names of individuals/employees authorized to sell your products: _____

Please check the market dates for which you are applying.

_____ June 17 _____ July 15 _____ August 19
 _____ September 16 _____ October 21

All markets are on Saturdays, from 10:00 a.m. – 2:00 p.m. at 137 Elm Street NW, Atlanta, Georgia 30314.

Vendor Category *(Check all that apply.)*

_____ Certified Naturally Grown Farmer	_____ Baker or Food Producer
_____ Certified Organic Farmer	_____ Value-added Food Producer
_____ Chemical-free Farmer or Grower	_____ Candle maker
_____ Aromatherapist	_____ Natural Beauty & Body Care
_____ Herbalist	_____ Soap maker
_____ Natural Home Goods Supplier	_____ Artist/Crafter
_____ Other _____	

(Please indicate or describe)

Product List *(Please list all products you plan to sell throughout the season.)* _____

Farmers and food producers, please provide a brief but detailed description of your growing practices and production methods. _____

(Signature on next page)

Farmers and food producers, please highlight some of your signature products. _____

Non-food producers and artists/crafters, please describe how your products qualify as natural, sustainable, organic or healthy (Please provide pictures of your work). _____

All applicants, please describe how your products support the mission of the farmer's market and fair. _____

All applicants, if any exists, please describe your connection to Atlanta's Westside community. _____

Application Requirements & Checklist

Completed vendor application

If applicable, compliance with all health department, GA Department of Agriculture, USDA and other applicable federal, state and/or local laws and regulations.

* Vendors are responsible for their own permits and licensing. Proof of all required permits and licenses may be required by regulatory agencies during official inspection of any

Participation & Indemnity Agreement: By submitting this application, the vendor is seeking approval to participate in the 2017 season of the AHA Return to Community Farmer's Market & Fair.

Requirements for participation: Vendors may only sell products that are grown, produced or handmade by the vendor, aligned with the market priorities and within the vendor categories and product details indicated on this application.

Vendors are responsible for the quality and safety of what they sell, thereby releasing the Atlanta Housing Authority from liability originating from any products sold at the market.

Vendors acknowledge that the Atlanta Housing Authority reserves the right to discontinue a vendor's participation from the market based upon violation of established policies and procedures. All applicants approved to participate in the market will be provided a copy of the policies and procedures and must sign a market agreement prior to participation in the market.

I, the undersigned, agree to comply with the above requirements.

Vendor's Signature	Date

DO NOT WRITE BELOW THIS LINE

Approved ___	Denied ___	Reason, if denied:
Approved by:		Date:
Notes:		



Atlanta Housing Authority

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www.atlantahousing.org

WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT

In consideration for my participation in the events, projects, programs, socials and other activities in association with or for The Housing Authority of the City of Atlanta, Georgia (“AHA”) (collectively, “my participation”), I, _____, hereby indemnify, hold harmless, release, waive and discharge AHA and its affiliates, and their officers, agents, volunteers, employees and assigns, from any and all liability, claims, demands, actions and causes of action whatsoever arising out of or related to any loss, damage or cost, including court costs and attorney’s fees and expenses, to me or to any property belonging to me, while on the premises of or while on the premises being utilized by AHA related to my participation.

I have read this Waiver of Liability and Hold Harmless Agreement in its entirety. I have asked questions, if needed, and fully understand this Waiver of Liability and Hold Harmless Agreement. I am at least 18 years of age and competent to execute this agreement.

Signature

Date

Printed Name