



ONE-TIME OR LIMITED-TIME
COMMUNITY EDUCATION AND INFORMATION
GUEST APPLICATION FORM
Updated April 2024

Date ____/____/____

Business/Organization name: _____

Applicant's Name(s): _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Contact Phone: ____/____/____ Cell Phone: ____/____/____

Email Address: _____

Website: _____

Emergency Contact Name: _____ Phone: _____

Briefly describe the content and activities of your display/presentation including types of information to be disseminated to the public. Further detail may be attached.

The market is held every Thursday beginning the fourth Thursday of May through the last Thursday of October. Please indicate which date(s) you are applying for with this application.

The hours and location of the Bath Farmers Market are as follows:

James Couzens Memorial Park on Webster Road, Bath, Michigan
May 30, 2024 – October 31, 2024
3:00 PM to 6:30 PM

The market is open rain or shine. Set-up begins at 2:00 PM and it is expected that guests will be in place at the Market and ready for the public by 3:00 PM. Due to safety concerns, no vehicle will be allowed to drive through the summer market after 2:30 PM. All guests are expected to remain in place until the close of the market. Location of the guest booth or table will be determined by the Recreation Coordinator. Guests of the market may distribute information or present demonstrations at the market as described in this application and approved by the Recreation Coordinator. No items may be sold by market guests. Those who sell items are considered vendors and must apply as such and pay market fees. Guests are responsible for their own tent/canopy and chairs.

ADULT CONSENT TO PHOTOGRAPH/VIDEOTAPE & DISSEMINATE WITHOUT COMPENSATION

I, _____ hereby give my consent to be photographed/videotaped while participating in any activity offered by the Bath Charter Township including the Bath Farmers Market. In addition, I consent to the reproduction and use of any such photographs and videotapes by the Township for educational, public relations and promotional purposes and I waive any claim by myself, or anyone claiming under or through me, for compensation of any kind in exchange for such photographs, videotapes and use.

WAIVER OF LIABILITY

In consideration for participating as a guest at the Bath Farmers Market, I assume all risks of injury suffered while on the premises of the market, and release the Bath Farmers Market and the Bath Charter Township from any and all liability, claim, damages, and costs sustained or incurred while on the premises of the Bath Farmers Market.

I, the undersigned, have read the Consent to Photograph and Waiver of Liability and both understand and agree to both said statements.

Signed _____

Printed Name: _____ Date: _____

Contact information:
Recreation Coordinator
Bath Charter Township
14480 Webster Rd.
P.O. Box 247
Bath, MI 48808
Office: (517) 641-6728
Fax: (517) 641-4170
Email: farmersmarket@bathtownship.us