

# Everyone's Harvest 2021 Participant Application



**ALL MARKETS RUN:** RAIN, SHINE OR FOG  
**SET-UP:** AN HOUR AND A HALF BEFORE MARKET IS OPEN

**MARINA, CA:** SUNDAY: 10AM TO 2PM: YEAR-ROUND  
**PACIFIC GROVE, CA:** MONDAY: 3PM TO 7PM (3PM TO 6PM WINTER): YEAR-ROUND  
**ALISAL, SALINAS, CA:** TUESDAY: 11AM TO 4PM: SEASONAL  
**NATIVIDAD MED. CENTER, SALINAS, CA:** WEDNESDAY: 11AM TO 3:30PM: SEASONAL  
**SALINAS VALLEY MEMORIAL, SALINAS, CA:** FRIDAY: 12:30PM TO 5:30PM: SEASONAL

**Everyone's Harvest**  
143 Upper Ragsdale, Suite 4,  
Monterey, CA 93940  
[www.everyonesharvest.org](http://www.everyonesharvest.org)

**GROUP NAME:** \_\_\_\_\_

**PHONE #:** (\_\_\_\_) \_\_\_\_\_ **WEBSITE:** www. \_\_\_\_\_

**FAX #:** (\_\_\_\_) \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**GROUP TYPE :**  NON-PROFIT     COMMUNITY GROUP     GOVERNMENT

OTHER, PLEASE LIST: \_\_\_\_\_

**REQUESTED SIZE 5'x5' or 10'x10'?** \_\_\_\_\_ **YEARS OPERATING:** \_\_\_\_\_

**GROUP'S MISSION AND VISION:** \_\_\_\_\_

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

**PERSON(S) REPRESENTING GROUP AT THE MARKET(S):** \_\_\_\_\_

**PHONE #:** (\_\_\_\_) \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**WHICH MARKETS ARE YOU INTERESTED IN ATTENDING AND WHAT DATES ARE IDEAL?**

MARINA     PACIFIC GROVE     ALISAL

**HOW WOULD YOUR GROUP LIKE TO PARTICIPATE IN THE MARKET?**

OUTREACH BOOTH     DEMONSTRATION     WORKSHOP

**WILL YOUR GROUP BE PROVIDING FOOD SAMPLING?**  YES     NO

\* If yes, group must understand Monterey County Health codes that apply and receive pre-approval from the Market Manager. If food is prepared outside of the market location, to be consumed by anyone at the market, a current copy of the off-site commercial kitchen health permit where this food is being prepared must be provided before the market date.

**OUTREACH BOOTH**

\* Groups coming to the market with an outreach booth are expected to come during setup time and to stay for the whole duration of the market to support all vendors participating.

**TOPIC OF OUTREACH BOOTH:** \_\_\_\_\_

**DESCRIBE GROUP’S DISPLAY AND WHAT WILL BE PROVIDED AT THE MARKET:**

\_\_\_\_\_

**ARE YOU SELLING MERCHANDISE FOR A FUNDRAISER? YES NO**

**PLEASE LIST ITEMS THE GROUP IS REQUESTING TO BE SOLD AT THE MARKET(S):**

\_\_\_\_\_

***ARE YOU A POLITICAL CANDIDATE, OR AN ADVOCATE OR OPPONENT OF A POLITICAL CANDIDATE OR A BALLOT MEASURE? YES NO***

*IF YES, you acknowledge your understanding of the following information and disclaimer by executing this application:*

**F. POLITICAL CANDIDATE, A PROPONENT OF A BALLOT MEASURE, OR ADVOCATES**  
 post this disclaimer in clear public view at all times at your space at Everyone’s Harvest Certified Farmers’ Markets. Participants must conduct their activity in their Market designated space. Walking outside of the Participant’s designated space and passing out publications is prohibited. Publications of political candidates and ballot measures are not allowed at Everyone’s Harvest’s Information Booths.

**Disclaimer:** Everyone’s Harvest is proud to provide space at its markets for all political candidates and their advocates, and proponents and opponents of a ballot measure on an equal opportunity and non-

**DEMONSTRATION/WORKSHOP/PERFORMANCE**

**TITLE OF DEMO/WORSHOP/PERFORMANCE:**

\_\_\_\_\_

**DESCRIBE WHAT ACTIVITY YOUR GROUP WILL CONDUCT AT THE MARKET:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SET-UP \_\_: \_\_ TO \_\_: \_\_ DEMO/WORKSHOP/PERFORMANCE TIME \_\_: \_\_ TO \_\_: \_\_**

**SPECIAL NEEDS OR REQUESTS TO CONDUCT YOUR DEMO/WORKSHOP/PERFORMANCE:**

\_\_\_\_\_

I, \_\_\_\_\_  
 HAVE READ, UNDERSTAND AND AGREE TO ABIDE BY THE *EVERYONE’S HARVEST CERTIFIED FARMERS’ MARKET* RULES AND REGULATIONS. I REALIZE THAT IF I DO NOT ADHERE TO *EVERYONE’S HARVEST CERTIFIED FARMERS’ MARKET RULES AND REGULATIONS*, I MAY BE FINED, SUSPENDED, AND/OR EXPELLED FROM THE MARKET AS DEEMED APPROPRIATE BY THE MARKET MANAGER OR EXECUTIVE DIRECTOR. FURTHERMORE, I UNDERSTAND THAT IF I AM INVITED TO PARTICIPATE IN THE MARKET, THE MARKET MANGER RESERVES THE RIGHT TO LIMIT THE COMMODITIES I BRING AND THE TIME FRAME OF MY ATTENDANCE. AGREE ALL FUNDS GENERATED FROM MARKET ACTIVITIES WILL GO BACK INTO OUR GROUP’S EFFORTS.

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

**BEFORE APPLYING FOR A FREE MARKET SPACE GROUPS MUST UNDERSTAND:**

- Free space may only apply to charitable groups who receive approval from the Market Manager to have a free space at the Market(s) for purposes of outreaching the charitable group's services and/or activities to the local community and for fundraising activities.
- All groups are considered on a weekly and rotating basis in order to give all interested groups a fair chance at attending the Market.
- Upon request from Everyone's Harvest, the charitable group must provide proof that the group is currently active and the representative's position in the group is valid with publications or minutes from a group's meeting.
- The group must provide their own, table(s), chair(s) and publications.
- Walking outside of the participant's designated space and passing out publications is prohibited.
- No items sold for fundraising activities by the groups may compete with paying participants.
- All community group demos/workshops/performances must be free to the public and appropriate for families.
- Everyone's Harvest reserves the right to determine if a fundraising activity is competing with a paying participant.

**ALL GROUPS MUST:**

- Be a group of people working to help the common good
- Have educational information about your group's mission and vision displayed at your booth
- Money generated from fundraising activities at the market must go back into the group's mission and not compete with paid Market vendors or farmers

**IMPORTANT GUIDELINES TO REMEMBER:**

- Everyone's Harvest encourages topics that promote healthy eating and active living

**PLEASE INCLUDE THE FOLLOWING WHEN SUBMITTING YOUR APPLICATION:**

- Everyone's Harvest *2021 Liability Waiver*
- Any additional information and literature

Everyone's Harvest Certified Farmers' Markets are operated by the non-profit organization, Everyone's Harvest, in accordance with state, county and local laws, for the benefit of farmers and consumers alike.

***For Internal Use Only***

**Participant Name:**

**Date Application Received / *Día Que La Aplicación Se Recibió:*** \_\_\_\_\_

**Date Application Processed / *Día Que La Aplicación Se Procesó:*** \_\_\_\_\_

**Congratulations, you are approved for the following market(s) / *Felicidades, usted esta aprobado para el/los siguiente(s) mercado(s) :***

\_\_\_\_\_

\_\_\_\_\_

**Sorry, unfortunately you are not approved to participate at an EH market.**

**For the time period of / *Para la temporada de:*** \_\_\_\_\_ **to / *hasta*** \_\_\_\_\_

**Sincerely / *Sinceramente,***

Staff Name \_\_\_\_\_ Staff Signature \_\_\_\_\_

Everyone's Harvest

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