



Windber Municipal Authority  
Market in the Park  
2024 Vendor Information



\*\*\*\*Please Print Legibly\*\*\*\*

Vendor Name: \_\_\_\_\_

Business Name: \_\_\_\_\_

Type of Products: \_\_\_\_\_

State Licenses/Certifications\* (If exempt, please list basis for exemption): \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Website: \_\_\_\_\_

Address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relation: \_\_\_\_\_

Emergency Contact Phone Number: \_\_\_\_\_

Do you have Business Insurance? \_\_\_\_ If Yes, please provide Company Name \_\_\_\_\_

How many 10' x 10' spaces do you need? \_\_\_\_\_

Do you need electricity at your space? \_\_\_\_\_

**\* Vendors must include a copy of their applicable State License or Certification with this form**

**\*All Vendors selling prepared food products, must be registered with the PA Dept. of Agriculture.**

This market is a **make it, bake it, or grow it** venture. Please abide by this rule when selling your items.

I hereby certify that the above information is true and correct.

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

