



**ROGUE RIVER SUNDAY**  
**MARKET**

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

Business contact \_\_\_\_\_

Phone Number \_\_\_\_\_

Mailing address \_\_\_\_\_

e-mail address \_\_\_\_\_

**Market Info:**

Primary Focus ( ) Grower ( ) Crafts ( ) Process Foods  
Other focuses ( ) Grower ( ) Crafts ( ) Process Foods  
( ) Concessionaire

Product or services have to be approved by the  
Rogue River Sunday Market coordinator.

I plan to start the market on \_\_\_\_\_  
and end on approximately \_\_\_\_\_

I agree to pay Rogue River Sunday Market \$35.00 for  
membership, and \$15.00 per week for a booth space.  
Make checks payable to Ogden Enterprises.

I understand that the set up time will be from 8:00  
am to  
9:00 am, with the market starting at 9:00 am. Break  
down will not be before 1:00 pm.

Signature \_\_\_\_\_

Please return this contract to Juli @ 541-621-2730  
Market Coordinator