Date:



OFFICE USE ONLY	,	
Date Received:		
Application sent:	Y	N

WE ARE PRODUCER-ONLY – please do not fill this out if your product is made outside of BC or you do not make what you would like to sell.

Vendor Category: Prepared Food ☐ Food Service ☐ Coffee/Beverage Service ☐			
Company Name:		Phone #:	
Address:		E-mail:	
City:	Postal Code:	Website:	
Contact Person(s):			
Short List of Products:			
Food is produced in a: Home Kitchen	☐ Commercial Ki	tchen	
Food Service/Beverage Service Vender Please include photos of food vending u		ze of vehicle/trailer/cart:	
Which Market Locations are you inter	rested in?		
☐ East Vancouver ☐ West End ☐	☐ Kitsilano ☐ Main St	Kerrisdale  Winter Market	
What time of year are you interested i	in participating?	/ Year Round 🗌	
Do you have FoodSafe/MarketSafe? [FoodSafe/MarketSafe before selling at a		eparers are required to have	
Current venues/sales outlets:			
What ingredients do you source from	local farms or produce	rs? What ingredients are imported?	

PLEASE READ: This form in intended for information purposes only. It is not an application and by no means shall it indicate explicit or implicit acceptance to VFM Markets. This form will be reviewed by VFM to determine if a formal application should be sent to the interested vendor. Unfortunately we cannot respond to every interested vendor.

If you do not hear back from us within the market season, please feel free to re-submit.

Fax, mail or email back to Vendor Recruitment Committee at the above address/numbers.