

— CITY OF SOLON —

# FARMERS Market



*buy local • buy fresh*

**WEDNESDAYS | 3 PM - 7 PM**  
**SOLOON BICENTENNIAL PARK**

34025 Bainbridge Rd | Solon  
Park at Solon Center for the Arts

JUNE 22 | JULY 6 | JULY 20 | AUG 3  
AUG 17 | AUG 31 | SEPT 14

*Produce • Delicious Eats • Food Trucks*

PRESENTED BY  
**SOLOON CENTER FOR THE ARTS**  
**SOLOON PARKS & RECREATION**  
EVENT INFORMATION | [tsullivan@solonohio.org](mailto:tsullivan@solonohio.org)



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*buy fresh*

**Buy Local! Buy Fresh!** Support your local farmers and small businesses!

The City of Solon Farmers Market provides the Solon community the opportunity to purchase locally grown produce, along with baked goods, fresh flowers, prepared food and so much more. And in return, the community supports the local farms, small businesses and crafters.

**LOCATION** | Solon Bicentennial Park, 34025 Bainbridge Road, Solon

**HOURS OF OPERATION** | 3 PM - 7 PM RAIN OR SHINE. There will be no refunds for rain. Set up must be completed by 2:30 PM. Booths must remain open until 7 PM. *Leaving early will result in forfeiting your space for the remaining weeks of the season.*

**FEE** | \$20 per market or \$120 for all 7 markets.

**VENDOR ELIGIBILITY** | All vendors must meet the following eligibility requirements:

- 75% of the items available each week must be locally grown or made by you. Local is defined as within 100 miles of the City of Solon. City of Solon may request information about items.
- In the event that you are unable to attend your weekly scheduled farmers market date, you must notify the City of Solon at 440.337.1400 or [tsullivan@solonohio.org](mailto:tsullivan@solonohio.org), 24 hours in advance. *If you miss more than two scheduled dates throughout the season, you forfeit your space for the rest of the season.*
- Product resellers are strictly prohibited.
- Every attempt will be made to balance the needs of the community, therefore, limits will be placed on similar products.

**BOOTH ASSIGNMENTS** | Vendors who register for the entire season will be assigned to the same booth weekly. All other vendor booth assignments will be communicated to the vendors prior to each market date. Each booth space is 10x10. Vendors are to provide their own tables and chairs, and tent with weights if they prefer. The market surface is cement, please plan accordingly. Each vendor is permitted to park ONE vehicle near their assigned space.

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**APPLICATION PROCESS** | Please read the following information and complete the application that follows.

- All interested vendors must submit completed applications to start the review process. The City of Solon will review the products being sold, dates available, etc. of applications on a first-come, first-serve basis.
- All non-produce products must also submit 4 photos along with their application. This includes flowers, bakery, homemade food (such as jams, jerky, honey, etc.), arts/crafts, etc. Pictures can be submitted to Tracy Sullivan at [SolonArts@solonohio.org](mailto:SolonArts@solonohio.org).
- Once your application has been approved, you will be contacted regarding paying necessary vendor fees. Payment can be made in the following ways:
  - Online through City of Solon's registration software. Links will be provided.
  - Checks can be mailed to or dropped off at Solon Center for the Arts (6315 SOM Center Rd, Solon, Ohio 44139). Please make your checks payable to SOLON CENTER FOR THE ARTS.
- Your booth is not confirmed until payment is received in full.

**MARKETING / COMMUNICATION** | The Farmers Market will be marketing through the City of Solon webpage ([solonohio.org](http://solonohio.org)), Facebook (SolonRec & SolonArtCenter) & Instagram ([solonrecdept](https://www.instagram.com/solonrecdept) & [solonarts](https://www.instagram.com/solonarts)). Information will also go in the City of Solon Activity Guide and sent out through City of Solon Eblast. We encourage you to follow the Farmers Market event for any up-to-date information that may be released. A copy of the event flyer can be sent upon request for you to promote in your communities as well. As the markets approach, you will also receive communication via email from the City of Solon. Please read all communications completely as they will have pertinent information included in them about your arrival, parking, and more.

**RELEASE / LIABILITY** | A signed and completed "Solon City Programs Participant Waiver" is required. Please see the last page of the application. Business insurance is recommended.

**COVID-19 REGULATIONS** | The City of Solon will follow the guidelines set forth by the CDC and Cuyahoga County Board of Health. Any attendees or vendors not feeling well should stay home. Regulations and procedures may change at any time.

If you have any questions, please feel free to contact Tracy Sullivan at [tsullivan@solonohio.org](mailto:tsullivan@solonohio.org).

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

Contact Name | \_\_\_\_\_

Street Address | \_\_\_\_\_

City | \_\_\_\_\_ State | \_\_\_\_\_ Zip | \_\_\_\_\_

Phone | \_\_\_\_\_ Email | \_\_\_\_\_

Website | \_\_\_\_\_

How did you hear about the market? \_\_\_\_\_

Each vendor is provided a 10 x 10 space for a tent & tables along with space for one vehicle.

The following information will help the City of Solon maximize product offerings and availability at each market, as well as monitoring the selling of similar products. Please be specific.

Product | \_\_\_\_\_ Months Available | \_\_\_\_\_

Please list any additional products, if needed | \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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Are the products listed raised or produced on your farm or at your residence?    Yes \_\_\_    No \_\_\_

Vendor statement (a brief summary that describes your business and/or your company). This information will be used on social media for marketing purposes. | \_\_\_\_\_

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Please select the dates that you are available to attend. |

June 22

July 6

July 20

August 3

August 17

August 31

September 14

Signature | \_\_\_\_\_

Date | \_\_\_\_\_

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## Solon City Programs Participant Waiver

Release: In consideration of permission granted to me for my participation in a City of Solon, Solon Recreation Department, Solon Community Center, Solon Senior Center, or Solon Center for the Arts program (hereinafter referred to collectively as "City Program") and other valuable consideration, I, the undersigned, on behalf of myself, my heirs, executors, administrators and assigns, do hereby release and discharge the City of Solon, its Recreation Department, Community Center, Senior Center, Center for the Arts, officers, directors, employees, officials and agents, jointly and severally, from any and all claims, demands, causes of action, judgements, and executions, which may arise out of my participation in a City Program. Further, in consideration of permission granted to me for my participation in a City Program, I hereby agree to the fullest extent permitted by law, on behalf of myself, my heirs, executors, administrators and assigns, to indemnify, hold harmless and defend the City of Solon, its Recreation Department, Community Center, Senior Center, Center for the Arts, officers, directors, employees, officials and agents, from and against any and all losses, claims, demands, payments, costs, fees, attorney's fees, suits, causes of action, recoveries and judgments, of every nature and description, made, brought or recovered against the City of Solon, and any of its departments or representatives, at any time by reason of my participation in a City Program.

Further I, as a participant in a City Program, agree to adhere to any and all rules, policies and guidelines as set forth by the City of Solon, the State of Ohio, the Ohio Department of Health, Cuyahoga County, the Cuyahoga County Board of Health, and/or the Responsible Restart Ohio Sector Specific Operating Requirements, as they pertain to the COVID-19 pandemic and the City of Solon's response, including but not limited to the screening of participants for signs of fever, acknowledgement by participants of being COVID-19 symptom free, and social distancing protocols. I understand that COVID-19 is a contagious disease that can lead to severe illness and possibly death and I understand the inherent risk of exposure to COVID-19 in any public place where people are present. I voluntarily assume all risks related to exposure to COVID-19 through my participation in a City Program.

I, as a participant in the City Program noted below, hereby agree to the terms as stated above:

Print Name \_\_\_\_\_  
Signature \_\_\_\_\_  
City Program \_\_\_\_\_  
Date \_\_\_\_\_

I, as a parent or legal guardian of a participant that is a minor, ward, or under the age of 18 years (hereinafter referred to as "Participant"), hereby consent to said Participant's participation in the City Program noted below, and agree to the terms as stated above as they relate to Participant's participation in the City Program named below.

Participant's Name \_\_\_\_\_  
Participant's Age \_\_\_\_\_  
City Program \_\_\_\_\_  
Parent or Legal Guardian's Name \_\_\_\_\_  
Signature of Parent or Legal Guardian \_\_\_\_\_  
Date \_\_\_\_\_