



OPEN MAY - OCTOBER  
WED & SAT 7AM – 1PM  
400 WEST 2ND STREET

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## Farmer's Market Rules

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**Welcome to the Rock Falls Farmer's Market! We are so glad to have you join us.**

- Vendors are required to register with the Rock Falls Chamber of Commerce prior to selling.
- There is no fee to sell at the market, however you may be asked to contribute a small amount to participate in special events. These funds will be used for advertising and activities at the events.
- There are no assigned spaces, however selling along the 2nd Street side of the parking lot helps people see your stand.
- Sellers must comply with Whiteside County Health Department guidelines.
- This is a sell at **Free Will Market**, meaning your products, prices, and sales practices are your responsibility. No one will tell you what prices to set, or how to manage your business. Your choices will either bring back customers, or repel them. Keep in mind that anything you do to make your stand a success will help the market as a whole. Be nice, we want to grow and we think you have a great smile!
- We encourage teamwork, and welcome your input into the planning process for the market.
- You are welcome to utilize the market any day it is open, for the entire day. You may come and go at any time throughout the day. You must remove all of your items at the end of the selling day.
- Swap Meet, Garage Sale, or "Junk" style sale spaces are not permitted at the market at any time.
- Vendors must comply with the requests of the Farmers Market Manager and the Rock Falls Chamber in order to retain their membership and be able to sell at the market.
- The Rock Falls Chamber, City of Rock Falls, and all associated with the Rock Falls Farmers Market assume no liability for any vendor, or shopper in the market. Vendors are fully responsible for the products they sell.
- The Rock Falls Chamber reserves the right to make changes to the rules of the market for the safety, prosperity, and well-being of the market, its vendors, and shoppers as needed.



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## Registration Form

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**Return To: Rock Falls Chamber, 601 W. 10th Street - Rock Falls, IL 61071**  
**For questions: Call 815-625-4500**

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

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Do you have Facebook (  ) Yes (  ) No

Address/City/State: \_\_\_\_\_

What do you plan to sell: \_\_\_\_\_

What days/times do you plan to sell: \_\_\_\_\_

I have read and agree to the Farmer's Market Rules. Signed \_\_\_\_\_ Date: \_\_\_\_\_