

# MWBC Shop Local Middletown Pop-Up 2025 - Cohort Application

Thank you for your interest in MWBC Shop Local's latest location, a one-month pop-up store in Middletown, MD!

At MWBC Shop Local, we are committed to creating a launchpad for startup and early-stage retail businesses and small-scale manufacturers. Our program combines learning opportunities, one-on-one business support, community building, and physical retail space.

MWBC Shop Local Middletown Pop-Up is a partnership between the Maryland Women's Business Center, the Frederick County Office of Economic Development, and Main Street Middletown.

**Program Summary:** All participants in Shop Local Middletown will be provided with retail space, two business training courses, and one individualized business counseling session. All participants are expected to work one day per week in the store. There is a \$75 fee to participate in this pop-up, which supports the services provided to participants in the one-month cohort. Additional details will be provided to accepted participants.

**Pop-Up Details:** This pop-up will operate from June 1 - 30, 2025 at The Wren's Nest (100-104 Main Street, Middletown, MD). Hours of operation will be Wednesday - Friday from 3pm - 7pm and Saturday - Sunday from 11am - 5pm.

**Application Process:** Businesses interested in participating in this one-month cohort and pop-up shop should fill out the following application in its entirety. If a question does not apply to you, please answer "N/A." Businesses that meet our criteria will be invited to one or more virtual interviews.

For any questions regarding the application, please email Martha Jimenez at [martha@marylandwbc.org](mailto:martha@marylandwbc.org).

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\* Indicates required question

1. Email \*

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**Applicant Information**

2. First and Last Name \*

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3. Select the address you will be providing: \*

*Mark only one oval.*

☐ Residential Address

☐ Business Address

4. Address \*

Street Address, City, State, Zip Code

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5. If operating a home business, do you have a Frederick County home business occupancy permit?

Read more: <https://www.frederickcountymd.gov/DocumentCenter/View/929/Home-Occupation-Permit?bidId=>

*Mark only one oval.*

☐ Yes

☐ No

☐ N/A

### **Applicant's Business Information**

6. Business Name \*

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7. If the name that your business is registered under is different from the name provided above, please provide the registered name.

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8. Date Business Was Formed \*

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9. Federal ID # (EIN)

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10. Is your business registered in the state of Maryland? \*

*Mark only one oval.*

☐ Yes

☐ No

11. Is your business in good standing with the state of Maryland? [Click here](#) to check your business status.

*Mark only one oval.*

☐ Yes

☐ No

☐ N/A

12. Do you have a valid sales tax license? \*

*Mark only one oval.*

☐ Yes

☐ No

13. Do you have business insurance? \*

*Mark only one oval.*

☐ Yes

☐ No

14. What is the main product your business produces/sells? \*

*Check all that apply.*

☐ Clothing/Apparel

☐ Self-Care Products

☐ Personal Accessories (purses, scarves, etc.)

☐ Jewelry

☐ Home Goods

☐ Original Visual Art

☐ Handmade Items

☐ Other: \_\_\_\_\_

15. Describe your business and products, including what makes them unique. \*

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16. Price Range of Products \*

*Mark only one oval.*

- ☐ Under \$25
- ☐ \$26 - \$50
- ☐ \$51 - \$100
- ☐ \$100+

17. Business Website and/or Social Media

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Program Commitments

18. Can you commit to a 1-month pop-up during the month of June, including working \*  
at the retail location for a minimum of one day per week?

Planned store hours:

Wednesday - Friday, 3pm - 7pm

Saturday - Sunday, 11am - 5pm

*Mark only one oval.*

- ☐ Yes
- ☐ No

19. Can you commit to participating in two learning sessions on topics relevant to \*  
product-focused small business owners?

*Mark only one oval.*

- ☐ Yes
- ☐ No

20. Can you commit to participating in one 1-hour business counseling session with an MWBC Business Consultant? \*

*Mark only one oval.*

☐ Yes

☐ No

21. Do you agree to share your business revenue and profit information with MWBC upon request while participating in the MWBC Shop Local program? \*

*Mark only one oval.*

☐ Yes

☐ No

### **Applicant Certification**

22. By submitting this application, I certify that all information provided is accurate and comprehensive to the best of my knowledge. I understand that additional information or documentation may be requested to complete my application. I acknowledge that failure to submit any requested items in timely manner may result in delays or rejection of my application. \*

Checking the box below serves as my e-signature to this application.

*Check all that apply.*

☐ I agree to comply with all program requirements if selected.

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