Farmers Market at Farmview Vendor Application (Please Print Neatly)

Vendor Name:	
Business or Farm Name:	
Street Address:	
City:	Zip Code:
Email:	Website:
Home Phone:	Cell Phone:
	d to sell (Produce vendors give appropriate date(s) you will have
Please include a brief bio about you	urself, your farm/business and produce/products:
I have read and agree to the Market at Farmview.	Market Policies and Rules of Operation established for the Farmers
	he Market Policies and Rules of Operations What May Be Sold and tion, certification and required licensure to the market manager.
I verify that I am the sole direct grower/producer of any and all produce brought to this market, that said produce complies with the 75-mile, locally grown guidelines, and agree to a farm inspection should I be notified by the market manager.	
	ted permission by me to represent myself and/or my farm at the
Vendor Name (Print):	
Vendor Signature:	
Date:	

Submit Applications To:
Ansley Shultz
ashultz@farmviewmarket.com