DALLAS FARMERS' MARKET VENDOR APPLICATION

Vendor Name:				
Business or Farm Name:				
Street Address:				
City:	Zip Code:			
Email:	Website:	Website:		
Home phone:	Cell phone:	Alternate:		
I authorize the market of (Check all that apply)	rganizers to give the following in	formation to customers who re	equest it:	
☐ Phone number	☐ Physical Address	☐ E-mail Address	☐ Website	
Check all the categories t	hat describe your sales:			
☐ Produce				
☐ Non-Produce				
Please list the products the	nat you plan to sell at the Market:			
☐ I have read and agree☐ I have received a copy Events Sponsored by	to the (year)Dallas Farmers of the Georgia Department of Ag Non-profit Organizations. ection as notified by Market Orga	griculture Guidelines for Food		
Signed:	Date:			
GUEST APPLICATION Caution. Once registered For questions or information	N FEE: \$25.00 NON-REFUNDABLE FEE: \$10.00/WEEK (This applied 2 consecutive no-call no-shows tion contact: John Grant - Email: MAKE CHECKS PAYABLE TO MAIL APPLICATIONS TO: P.	es to invited specialty produce will result in the vendor being kbgrant15@gmail.com The Dallas Farmers' Mark). returned to guest status. et"	
Market Management Us Date Submitted: Fee Paid: Received by:	<u> </u>			