

Midtown Bryant's Farmers' Market

PARTICIPATION FORM

This form will give the Midtown office information regarding participants, their products, and when they will be attending the Farmers' Market. This form will be kept on file. Please take a few moments to complete the below form, sign it and return by mailing to the Midtown office or give it to the Midtown Market Manager or On-Site Manager the first time you attend the Market.

Thank You !

Name: _____
(Your name *not* Business Name) (Please Print)

Business Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Vendor Category (please check one)

- Farmer (100%) Organic
- Farmer with local grown supplement
- Farmer with local and shipped supplement
- Plants and Flowers
- Fresh Cut field and garden flowers
- Baked goods / Canned foods

Brief Description of the Product You Will Be Selling:

When Will You Begin Attending ? _____

By signing below I am acknowledging that I have completely filled out the above form and that I have read and will abide by the Farmer's Market Rules and Regulations.

Participant's Signature (Required)

Date