

2016 BURRILLVILLE FARMERS MARKET VENDOR APPLICATION
Saturdays, late spring to early fall, 9:30-12:30
at The Stillwater Mill Center, Tinkham Lane, Harrisville, RI 02830

Name _____

Farm/Business Name _____

Farm/Business Address _____

E-Mail Address _____

Web Address _____

Phone# _____ Cell Phone# _____

Please check off from list of allowed items you will be selling at market:

- | | | | |
|--|---|---------------------------------------|--|
| <input type="checkbox"/> Vegetables | <input type="checkbox"/> Herbs | <input type="checkbox"/> Apples | <input type="checkbox"/> Baked Goods |
| <input type="checkbox"/> Vegetable Seedlings | <input type="checkbox"/> Herb Seedlings | <input type="checkbox"/> Strawberries | <input type="checkbox"/> Jams or Jellies |
| <input type="checkbox"/> Sweet Corn | <input type="checkbox"/> Potted Plants | <input type="checkbox"/> Blueberries | <input type="checkbox"/> Maple Products |
| <input type="checkbox"/> Potatoes | <input type="checkbox"/> Cut Flowers | <input type="checkbox"/> Raspberries | <input type="checkbox"/> Honey |
| <input type="checkbox"/> Meats (may take orders) | <input type="checkbox"/> Dried Flowers | <input type="checkbox"/> Other Fruits | <input type="checkbox"/> Yarn |
| <input type="checkbox"/> Eggs | <input type="checkbox"/> Flower Seedlings | | |

Please list any other items you might be selling at this year's market not included in list above:

Additional information or concerns:

Are you a Certified Organic Farm? If so, please include a copy of most recent certification
If your business requires licensing, permits or additional insurance, etc., include a copy of your current license.

- All BFMA Members — \$30, due by May 1st
Weekly Member Booth Fee — \$15 each market day you attend
Prepay Full Season — \$200, due by May 1st (\$70 savings)
Prepay Half Season — \$125, due by May 1st (\$10-\$20 savings)
Single Market Vendors — \$20, due upon approval

Are you a New Vendor? _____

Are you a Returning Vendor? _____

Participation Agreement: I agree to abide by BFMA Bylaws and to provide only the highest quality products available and to conduct myself in a professional manner at all markets I attend.

Signature _____ Date _____

Return completed form to:
BFMA, PO Box 215, Pascoag, RI 02859 or email completed form to burrillvillefma@gmail.com.

Questions? Contact Deb Yablonski, Market Manager, 568-3191 or Jonathan Gruttadauria, Vendor Manager, 568-3597 or contact us by email at burrillvillefma@gmail.com or online at www.burrillvillefarmersmarket.org.