

Judd Hill Farmers' Market Vendor Application

juddhillfarmersmarket.com

Name: _____ Date: _____

Business/Farm Name: _____

Mailing Address: _____

Business/Farm Address: _____

Cell phone: _____ Email: _____

Facebook link: _____ Instagram link: _____

Vendor Directory (list of *contact information you allow us to share with public*): _____

List Produce/Products you will have available: _____

Check the line(s) that will describe your participation at the market this season.				
SATURDAY		TUESDAY		Only when I have produce or product (less than 5 times/season)
<input type="checkbox"/>	Every Saturday (27 weekends)	<input type="checkbox"/>	Every Tuesday (13 weekdays)	
<input type="checkbox"/>	Most Saturdays (20-25 weekends)	<input type="checkbox"/>	Most Tuesdays (10-12 weekdays)	
<input type="checkbox"/>	Half the season (13-14 weekends)	<input type="checkbox"/>	Half the season (6-7 weekdays)	
<input type="checkbox"/>	Less than half the season (1-12 weekends)	<input type="checkbox"/>	Less than half the season (1-5 weekdays)	
<input type="checkbox"/>	I do not plan to attend on Saturdays	<input type="checkbox"/>	I do not plan to attend on Tuesdays	

I have received, read, and agree to follow the rules and regulations of the ASU Regional Farmers' Market. I understand the fees and requirements of me as a vendor.

Signature of Vendor: _____ Date: _____

Submit to: Market Manager, email: juddhillfarmersmarket@yahoo.com

OR mail:

Dr. Kim Pittcock

367 CR 335

Jonesboro, AR 72401

Crafters must attach photos of product(s).