## **The Flowery Branch Farmers Winter Market - 2021 Application**

Contact Name:	
Phone #: (Cell)	Home:
Vendor / Business Name:	
Address:	
City:	Zip:
Produce / Items to be sold - List eve	
The Flowery Branch Market will be h	neld every other Thursday from 3:30 pm - 6:30 pm (Rain or Shine) Novomber - Apri 10 Pine Street, Flowery Branch, GA 30542* et location: 5302 Railroad Ave, Flowery Branch, GA 30542
	cked or prior notice given) can result in a Re-Entry Fee* plan to attend: Entire Season? Yes or No
75 The Flowery Branch Market F My signature on this form confirms my Guidelines, Policies and Rules for the I	lication and payments by Nov 1, 2021 ee for the 2021 Winter season is \$75.00 for a single 10 X 10 Booth area consent as well as my Vendor Representatives acknowledgement of the Market. Market management reserves the right to conduct criminal
	ainment and other contractors through the Flowery Branch Police Dept.
Signature:	Date:
Send Check or Money Order to:	
Flowery Branch Farmers Market	Email application: renee@flowerybranchga.org
c/o Renee Carden P. O. Box 757	DISCOVER To pay be credit card,
Flowery Branch , GA 30542	Card VISA DISCOVER To pay be credit card, contact Renee at 678-400-5108