

## Black Hills Farmers Market

## **Application Amendment Form**

## Please complete and return to BHFM via email

to manager@blackhillsfarmersmarket.org or text a photo of the form to 605-646-0976

APPLICANT INFORMATION		
Business name:		
Applicant/vendor nam	ne:	
Phone:	Email:	
CHANGES TO APPI	LICATION	
	vish to make to your originant act information, additiona	al application (example: change of al products for sale, etc.).
•	oducts for sale are subject less they are approved.	to review. You may not bring these new
AGREEMENT		
vendor expectations as	nd agree to comply with the arket. Non-compliance will	d all application requirements and e information and rules provided by the result in revocation of permission to
Signature		Date