

# 2017 New Concord Farmers' Market Vendor Registration Form

Name: \_\_\_\_\_

Business  
Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Goods / Produce Selling at the market: \_\_\_\_\_

Anticipated Selling Schedule:

All Season (July 10—Oct. 9)

July 10  July 17  July 24  July 31  Aug. 7  Aug. 14

Aug. 21  Aug. 28  Sept. 4  Sept. 11  Sept. 18  Sept. 25

Oct. 2  Oct. 9

Payment: \_\_\_\_\_

I have received a copy of the Vendor Guidelines and agree to abide by them.

Signature \_\_\_\_\_

