

FOR OFFICE USE ONLY
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CHECK #
DATE

APPLICATION FOR NEW MEMBERSHIP - 2024

1. What's your name and contact information?	
Name	
Farm/Business Name	
Location	
Mailing Address	
Phone	
Email Address	
Unless you request otherwise, all correspondent	ce concerning the Market will be done through email.
2. When will you be attending? May 25 June June	July □Aug □Sept □Oct 5 □Oct 12 □Oct 19 □Oct 20
 3. What would you like to sell? Please provide a deta Indicate which are your primary and secondary production. If you are selling crafts/art write a brief description of your provided in the selling crafts and selling crafts. If possible, send pictures or a small sample that can be selling crafts. 	cts. Your work and production process.
 4. When you send your application, please also inclu A copy of your MOFGA Organic certificate for items you A brochure, description, and website for our Vendor Li \$10 nonrefundable application fee, that will be applied 	u will sell as organic. st and promotional materials.
5. By signing this application you agree to have <u>read</u> certify that you have the appropriate and up-to-date	
Signature	Date

6. Mail this form with payment: Blue Hill Farmers' Market, PO Box 535, Blue Hill, ME 04614