ZION CANYON FARMERS MARKET
2010 SATURDAY VENDOR APPLICATION

NAME_____

FARM/BUSINESS_____

ADDRESS_____

MAILING ADDRESS (if different from above**)** _____

CITY_____**STATE**_____**ZIP**_____**COUNTY**_____

HOME PHONE_____**BUSINESS PHONE**_____

CELL PHONE_____**EMAIL**_____

I WILL BE SELLING (please mark all that apply**):**

_____**PRODUCE, HERBS, PLANTS, EGGS, OR FLOWERS**
_____**CHEESE, DAIRY, etc. ▲****
_____**HONEY▲****
_____**VALUE-ADDED AGRICULTURAL GOODS: JAMS, JELLIES, PRESERVES, etc. ▲****
_____**BAKED GOODS, BEVERAGES ▲****
_____**AGRICULTURAL RELATED CRAFTS ☏****
_____**OTHER ☏**

▲ Must comply with State and/or County health requirements
☏ With Market Committee prior approval

PLEASE LIST ALL THE PRODUCTS YOU PLAN TO SELL AT THE MARKET:

_____
_____
_____
_____
_____

I HAVE READ THE ZION CANYON FARMERS MARKET GUIDELINES AND APPLICATION AND AGREE TO THE TERMS OF THE ZION CANYON FARMERS MARKET. Compliance with all rules and regulations of the Utah Dept. of Agriculture and Food, and the US Food and Drug administration and all other regulating agencies is the sole responsibility of the vendor

SIGNED_____DATE_____

PLEASE PRINT NAME _____

**** I HAVE STATE VENDOR REGISTERED FOOD PRODUCTS AND HAVE COPIES OF ALL LICENSES OR CERTIFICATES REQUIRED BY THE COUNTY OR THE STATE TO DISPLAY AT MY BOOTH AND FOR THE MARKET MANAGER.**

MY SSN or Tax ID No. is:_____

SIGNED_____DATE_____

BRING COMPLETED FORM TO YOUR FIRST MARKET.

QUESTIONS? PLEASE CALL:

Lisa Zumpft 772-0435
or
EMAIL: zioncanyonfarmersmarket@zionharvest.org anytime

THANK YOU FOR YOUR SUPPORT! WE LOOK FORWARD TO SEEING YOU AT THE ZION CANYON FARMERS MARKET!!