



2017 Farmers Market Application Form

Vendor Name: _____

Address: _____

Phone: _____ Cell Phone: _____

Email address: _____

Please **circle** the types of items you plan to sell.

- | | | | |
|---------|------------|----------------|-------------|
| Fruits | Vegetables | Baked Goods | Pet Goods |
| Flowers | Meats | General Crafts | Photography |
| Plants | Eggs | Garden Crafts | |

List prepared foods for take-out or on-site you plan to sell:

On-Site Prepared
foods: _____

Set-up Time: 4pm-5pm & Public Vending Time: 5pm – 7pm

Circle farmers market dates you plan to attend.

May 16th	June 6th	July 11th	August 1st	September 5th
May 23rd	June 13th	July 18th	August 8th	September 12th
May 30th	June 20th	July 25th	August 15th	September 19th
	June 27th		August 22nd	
			August 29th	

**RETURN APPLICATION, RELEASE FORM, & PAYMENT TO FARMERS MARKET COORDINATOR
SILVIA QUEZADA AT ADDRESS BELOW OR VIA EMAIL AT SILVIA@UNIVERSITY-HEIGHTS.ORG**

City Hall, 1302 Melrose Ave., University Heights, IA 52246