

Oakwood Farmers' Market
Vendor Registration Form
Email to: 61858market@gmail.com

Contact Information:

Company Name: _____

Vendor Name: _____

Address: _____

City, State, Zip: _____

Business Phone: _____ Cell: _____

Email: _____

Type of Business: Product(s) and Service(s)

Do you need power: Yes No Do you require a food license: Yes No

Please attach a copy of your food license if it is needed for you to sell

Will you require your vehicle in the market area: Yes No

I have read the farmers market guidelines and agree to follow them:

Signature: _____

Dates of Participation if you sign up with a punch card or weekly

Circle all that apply:

June 16 June 23 June 30 July 7 July 14 July 21 July 28 Aug 4 Aug 11

Aug 18 Aug 25 Sept 1 Sept 8 Sept 15 Sept 22 Sept 29 Oct 6