

## INDEPENDENCE FARMERS MARKET

## **Grayson Landcare**

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## Farmers Market application

Name:		
Farm/Bussiness name:		
Address (physical location of farm or ki	itchen)	
Distance from Market		
Acres farmedleased	owned	
Email:		
Phone number:_home	cell	
Number of full time employees	part time employees	(including yourself/family)
Is your businesswoman-owned?		
Are you a veteran?		
Number of years farming		
Is the primary owner of your business y	ounger than 35?	
Do you have organic certification?	are you in the 3 year transit	ion period?
Primary products:		
Pease write a description of your busing your preferred picture! (use the back if		oto on the webpage. Please feel free to provide
I have read the market rules and under	stand them and agree to abide b	by them.
Signature:	Date:	