

F DOWNTOWN
F ARMERS
M ARKET
at Ancestor Square

Application

May 10 – November 1, 2008 / 8am - noon

Name _____
(Individual or Business and Owner)

Street Address _____

City _____ State _____ Zip _____

Phone(Day) _____ (Eve) _____

Email / Website _____

Type of Goods (circle all that apply):

Produce Fruit Dairy Eggs Meat Live Plants Cut Flowers Herbs

Baked Goods Prepared Foods Canned Goods Candles Soaps/Lotion

Clothing/Textiles Drawing Painting Glass Jewelry Photography

Pottery Sculpture Woodwork OTHER:

Please describe all items to be sold: (attach sheet if needed)

If you know which days you would like to attend or which months, please specify them here: _____

May 10th – November 1, 2008. Every Saturday from 8am – noon, rain or shine.

I have read and understand the rules and guidelines of the Downtown Farmers Market. I certify that the goods I will bring to sell are made and produced by myself or within the business that I own. I understand that the Downtown Farmers Market may use my name and photographs for advertising purposes.

Signature(s) _____ Date _____

For the benefit of e-mail newsletters and space limitations within the courtyard we need to know one week in advance of all participating vendors for the next market. *Thank you.*

2 W. St. George Blvd. #22, St. George, Ut 84770, #435-632-9515 Fax: 435-656-0504

downtownfarmersmarket@yahoo.com