2017 DOWNTOWN FRANKLIN FARMERS MARKET

FOOD VENDOR APPLICATION

Vendor/Business Name:			
Address:			
Phone:	Email:		
Contact Person:	Phone	: Provide a # where you can be on Fri pm/Sat am	reached
The 2017 Market will run from June 3 rd - Se to at least one Saturday a month.	eptember 30 th . We	are asking food vendors to	commit
Please indicate the Market days you prefer,	in order of prefere	ence (1 - 4):	
First Saturdays (June 3 rd , July 1 st , August	5 th , September 2 nd)		
Second Saturdays (June 10 th , July 8 th , Au	gust 12 th , September	- 9 th)	
Third Saturdays (June 17 th , July 15 th , Aug	just 19 th , September	16 th)	
Fourth Saturdays (June 24 th , July 22 nd , Au	gust 26 th , September	r 23 rd)	
I want to sell (list items; be as specific as possik	ole):		
* V / !'C-		Hills Nove Paradish as	
* You must attach copies of any licenses/certific			
I want to sell food items that are: cook	(ed on sife	ore-cooked	
I need an electric outlet: Yes No			
By signing this application, the vendor is Regulations and agrees to be bound by records). The vendor further acknowledges the Farmers Market and may be asked to le	same (Please keep and agrees he/sh	o the Rules & Regulations f e has no legal right to partic	for your
	Signature		Date
	Printed Name &	 Title	

Return completed application to: DFFM Committee

c/o City of Franklin 1 Benjamin Franklin Way Franklin OH 45005

dfisher@franklinohio.org or doalfi69@gmail.com