



Shelburne Farmers Market Application 2020

Date

Name

Email

Home Address

Home Phone

Cell Phone

Business Name

Website

Business Address

Business Phone

PLEASE INDICATE THE ITEMS YOU WOULD LIKE TO SELL. *If not listed, specify in spaces provided. If you need more space, use additional paper*

Agriculture

Month Available at Market

	Vegetables	Varieties	June	July	Aug	Sept	Oct
	Seedlings						
	Asparagus						
	Beans						
	Beets						
	Broccoli						
	Brussels Sprouts						
	Cabbage						
	Carrots						
	Cauliflower						
	Corn						
	Ornamental Corn						
	Pop Corn						
	Cucumbers						
	Eggplant						
	Gourds						
	Leeks						
	Lettuce & Greens						
	Onions						
	Peas						
	Peppers						
	Potatoes						
	Pumpkins						
	Radishes						
	Summer Squash						
	Tomatoes						
	Tomatoes, Heirloom						
	Turnip Roots						
	Winter Squash						
	Zucchini						

	Flowers	Varieties	June	July	Aug	Sep	Oct
	Dried Flowers						
	Potted						
	Arrangements						
	Cut Flowers <i>name</i>						
	Fruit						
	Apple						
	Blackberries						
	Blueberries						
	Cantaloupes						
	Cherries						
	Grapes						
	Peaches						
	Pears						
	Plums						
	Raspberries						
	Rhubarb						
	Watermelons						
	Herbs						
	Maple Syrup						
	Maple products						
	Honey						
	Honey Products						
	Meats						
	Beef						
	Pork						
	Lamb						
	Poultry						
	Eggs						
	Dairy products						
	Cheese						
	Yogurt						

Other Agricultural products (specify)

Processed Foods: Cider, Jams, Salsa, Sauces, Pickles, Other (for each item list Vermont ingredients used):

Baked Goods: (for each item list Vermont ingredients used)

Prepared Foods: ready to eat at the Market (for each item list Vermont ingredients used)

Crafts: (will require a Shelburne Farmers Market Craft Jury Application) for each item list Vermont materials used:

Please check all markets you will attend (the market is held rain or shine)

To be a season participant you must attend a minimum of 16 (80%) Markets

May 23	May 30	June 6	June 13	June 20	June 27	July 4	July 11	July 18	July 25	Aug 1

Aug 8	Aug 15*	Aug 22	Aug 29	Sept 5	Sept 12	Sept 19	Sept 26	Oct 3	Oct 10	Total Markets Attending

***Shelburne Day**

Growers Only

How long have you been growing? _____ How much acreage do you have in production? _____

How do you currently market your products?

How long have you been producing your product(s)? _____

Do you have employees? _____

What is your role in your business? _____

Who will be selling your products(s) at the Market?

Would the weather affect your attendance? _____ If so explain _____

Do you attend other markets? ___ If so, where? _____

How would you be an asset to this Market?

This is a preliminary application. Upon acceptance, you will receive a registration form.

Please return completed form to:

Shelburne Farmers Market, PO Box 383, Shelburne VT 05482

For more information contact market manager: shelburnefarmersmarketvt@gmail.com or (802)-391-9809