

# Pittsfield Farmers' Market

## Application for Membership

2005 Season

Note: Read the "Market Rules" first.

Your Name \_\_\_\_\_

Farm Name \_\_\_\_\_

Address \_\_\_\_\_

Town \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_ Website \_\_\_\_\_

Please tell us what you will bring to market: **Y**= Yes, definitely will bring. **M**=Maybe will bring.

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Mixed Vegetables  | <input type="checkbox"/> Vegetable Seedlings          | <input type="checkbox"/> Herbs          |
| <input type="checkbox"/> Sweet Corn        | <input type="checkbox"/> Flower Seedlings             | <input type="checkbox"/> Maple Products |
| <input type="checkbox"/> Potatoes          | <input type="checkbox"/> Hanging baskets              | <input type="checkbox"/> Eggs           |
| <input type="checkbox"/> Apples            | <input type="checkbox"/> Cut Flowers                  | <input type="checkbox"/> Lamb           |
| <input type="checkbox"/> Other Tree Fruits | <input type="checkbox"/> Annuals                      | <input type="checkbox"/> Chicken        |
| <input type="checkbox"/> Cider             | <input type="checkbox"/> Perennials                   | <input type="checkbox"/> Turkey         |
| <input type="checkbox"/> Strawberries      | <input type="checkbox"/> Dried Flowers                | <input type="checkbox"/> Beef           |
| <input type="checkbox"/> Raspberries       | <input type="checkbox"/> Baked Goods                  | <input type="checkbox"/> Pork           |
| <input type="checkbox"/> Blueberries       | <input type="checkbox"/> Jams, Jellies, Relishes, etc | <input type="checkbox"/> Goat Products  |
| <input type="checkbox"/> Honey             | <input type="checkbox"/> Dairy (cow)                  | <input type="checkbox"/> Other _____    |
| <input type="checkbox"/> Seeds             | <input type="checkbox"/> Maple Products               | _____                                   |
| _____                                      | _____   | _____                                   |

Help us determine how many members will be at market throughout the season. Circle the days and seasons you expect to be coming to market. *This is not a commitment, just an indication of when you expect to be attending.*

	<u>2-6pm</u>	<u>2-6pm</u>		<u>2-6pm</u>	<u>2-6pm</u>
Early May	Mon.	Thur.	Early Aug	Mon.	Thur.
Late May	Mon.	Thur.	Late Aug	Mon.	Thur.
Early June	Mon.	Thur.	Early Sept	Mon.	Thur.
Late June	Mon.	Thur.	Late Sept	Mon.	Thur.
Early July	Mon.	Thur.	Early Oct	Mon.	Thur.
Late July	Mon.	Thur.	Late Oct	Mon.	Thur.

### Agreement:

I have read and agree to abide by the rules of the market, as enumerated in the enclosed rules sheet. I realize that failure to do so may result in revocation of membership and attendance priviledges.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Send Annual Dues payment (\$25) to the Market Treasurer Tom Roberts, 3645 Snakeroot Road, Pittsfield ME 04967. If paying by check, make check payable to "Pittsfield Farmers' Market".

*Draw a map to your farm on the back of this application.*

*Include a brief description (25-100 words) of your operation and/or wares.*

(A copy of this application and the market rules are downloadable from our website [www.pittsfieldfarmersmarket.org](http://www.pittsfieldfarmersmarket.org))

(For treasurer's use:)

Annual Dues Paid (amt)	Cash?	Check? #
Paid by: _____	Date: _____	

\_\_\_\_\_