

Franklin Farmer's Market

Under the City Market
306 Willow St. Franklin, La. 70538

VENDOR REGISTRATION FORM

PLEASE PRINT CLEARLY

Name(s) _____

Telephone Number(s) HOME: (____) _____ MOBILE: (____) _____

Mailing Address: _____

Location(s) of Farm(s): _____

Market Sessions to be attended: (Please those that apply) Tuesday (p.m.) Saturday (a.m.)

List the items offered for sale:

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

My Signature below confirms that I, _____ have read the **RULES AND REGULATIONS** of the Farmer's Market that was given to me and agree to follow them carefully. I also give permission for the County Agent and our Market Committee to visit my place of production at any time (announced or unannounced).

Signature: _____ Date: _____

Market Committee Chairperson: _____ Date: _____

Return to: Franklin City Hall
300 Iberia St. / P.O. Box 567
Franklin, LA. 70538