

# MIDDLEBURG COMMUNITY FARMERS MARKET

## 2017 Application Form



Producer's Name: \_\_\_\_\_

Name of Business: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Telephone Number: Cell phone: \_\_\_\_\_

Work: \_\_\_\_\_

Fax: \_\_\_\_\_

Website: \_\_\_\_\_

Facebook Page Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Business Address: \_\_\_\_\_

Directions to Place of Business – include physical address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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