

***THE MAYOR AND COMMISSIONERS  
OF THE TOWN OF ELKTON***

**ELKTON FARMERS MARKET**

**VENDOR APPLICATION FORM**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE NO.: \_\_\_\_\_

SELLING THE FOLLOWING ITEMS: PRODUCE \_\_\_\_\_ NON PRODUCE \_\_\_\_\_

Description:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

SPACES DESIRED (please specify which space you would like to rent):

\_\_\_ 1 \_\_\_ 2 \_\_\_ 3 \_\_\_ 4 \_\_\_ 5 \_\_\_ 6 \_\_\_ 7 \_\_\_ 8

DATES REQUESTED: \_\_\_\_\_

Vendors must observe the rules and regulations of the Farmers Market.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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FOR OFFICE USE ONLY

APPROVED BY:

\_\_\_\_\_  
Lewis H. George, Jr.  
Town Administrator  
Market Manager

\_\_\_\_\_  
Date

AMOUNT PAID: \_\_\_\_\_