

## **Gravenhurst Farmers' Market**

## Community/Charity Booth Application

Company or Business Name:	
Street Address:	
City/Town:	Postal Code:
Website:	
Main contact name:	Main contact phone #:
Main contact cell #:	Main contact email:
Brief Company Description (this is	for the public, so we can tell them more about you):
Note: email your company logo (jpg, p	ong, gif) to gravenhurstfmmgr@gmail.com
Have you been a vendor at the GFM b	pefore? □ Yes □ No
Small (10 x 10 ft): Community Booth \$ Board.	\$10 charge per day. Payment is required once approved by the

## Please circle the dates that you would like to attend our market:

June	5	12	19	26	
July	3	10	17	24	31
August	7	14	21	28	
September	4	11	18	25	
October	2	9			

	information (website, business phone and email) to appear on the sed on our social media pages in areas such as vendor lists and
Is your Community Organization lo Please describe what you will be d	ocated in or, serve Gravenhurst?   Yes   No  Hoing at your booth:
(Example: educating, fundraising,	recruiting, sampling.)
You cannot sell products at your bat your booth? ☐ Yes ☐ No	pooth but you can accept donations. Do you plan to accept donati
The Market would like to hear how	w you will be promoting or supporting the Market.
For example: social media, websit	e, giveaways etc.
and Municipal regulations. I may f am found to be in non-compliance	es and Regulations Agreement and all applicable Federal, Provinci Forfeit my right to promote at the Gravenhurst Farmers' Market if e.  The Gravenhurst Farmers' Market Rules and Regulations Agreemen
$_{\square}$ I certify that the above informat	tion is true and accurate to the best of my knowledge.
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Dam till 2:00pm. No early shutdowi	Booth must be ready and attended for the duration of the Mark ns will be permitted. You must supply your own Tables, Chairs an Tent.  DATE:
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