

Town Hall Farmers' Market of Greensboro Vendor Application

Name: _____

Business Name: _____

Address: _____

Phone: _____ email: _____

Products offered for sale: _____

Dates you plan to attend the market: _____

(Market begins Memorial Day and continues to October)

Deposit against costs of running market: \$35

(Due with application)

I have read the enclosed rules of this market and agree to abide by them.

Signature: _____

For further information please contact the Greensboro Town Clerk's Office (802) 533-2911, email : brideyvt@yahoo.com