



PRINCE GEORGE FARMERS' MARKET ASSOCIATION APPLICATION FORM

Check off the boxes that apply to you

New Vendor Returning Vendor Make It Bake It Grow It

Food Vendor Market Safe Certificate Food Safe Environmental Health Check

Name: Last _____ First _____

Business Name _____

Mailing Address _____

Telephone # _____ Email _____

IMPORTANT!

I agree to receive occasional email updates and announcements from the PGFMA. The PGFMA will not distribute my email address, phone number or address to any other individual or organization without my consent.

Date _____ Vendor Signature _____

Please specify individual items that you intend to sell at the market. Approval to participate at the PGFM will be given only if full details are provided. Any items added later must go through an approval process before displaying for sale at your table. The Market Manager can assist you with any questions you might have. All New Vendors are subject to a probationary period before they can become a Member of the Market. Please ask the Market Manager for more information.

Product(s):

ANNUAL MEMBERSHIP FEE: \$30

IF REQUIRED USE THE OTHER SIDE ⇨

OFFICE USE ONLY

Date : _____

Non-Voting Member

Paid Amount

Cash

Cheque #

Approved by _____

Prince George Farmers' Market Association, PO Box 2812, Prince George, B.C., V2N 4T6

Website: www.farmersmarketpg.ca Secretary Email: info@farmersmarketpg.ca

Market Manager Email: marketmanager@farmersmarketpg.ca

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