

**Methow Valley Farmer's Market
Community Group Application**

Group Name: _____

Contact Person: _____

Address: _____

Phone: _____

Email: _____

Please read Section 2.1.8 of the Policy Handbook carefully before completing this application to familiarize yourself with the guidelines for Community Group participation in the Methow Valley Farmer's Market.

What is the purpose of your organization? _____

Explain how your booth fits within the guidelines:

Explain all activities you plan at your booth:

Is there anything else the board should know?

What dates do you plan to attend? _____

Please be advised that Community Groups will not be assigned a space unless it has been formally scheduled in advance with the Market Master and approved by the Board.

Vendors have first priority for stall space and Community Groups will be assigned stall space after 8:00 am.

Signed: _____ Date: _____

MVFM USE ONLY BELOW THIS LINE

Received Date: _____ Approved/Denied (circle one)

by: _____

Board

Comments/Restrictions: _____
