

2016 Capital Harvest Farmers Market Vendor Application

Business Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone #1: _____ Telephone #2: _____

Contact Name: _____ Contact Cell #: _____

Contact Email: _____

Onsite Contact: _____ Onsite Cell #: _____

Vehicle Make: _____ Vehicle Model: _____

Vehicle Color: _____ Vehicle Year: _____

Vehicle Tag #: _____ State of Registration: _____

Driver's License Number: _____ State of Registration: _____

Date of Birth: _____ Social Security #: _____

Website: _____

Facebook: _____

Twitter: _____ Instagram: _____

Type of Vendor: Farm Processed Foods Food Concessions

Describe the products you will sell: _____

Items not listed on this application may not be sold at the market without prior written approval of market management.

Complete this section if you are a Farmer & Grower:

Vegetables Fruits Meats, Milk or other Dairy Products

Do you do your own farming? Yes No

How many acres do you cultivate?

Are you Certified Organic? Yes No

Are you Food Alliance Certified "Sustainable"? Yes No

Are you Certified Biodynamic? Yes No

Are you Certified Naturally Grown? Yes No

Complete this section if you are a Processed Food or Food Concession vendor:

Describe your philosophy for sourcing fresh ingredients: _____

List the farms/growers who provide ingredients for the products you are making:

Where is your product is made: _____

Please attach menus, photos and recipes for the items you wish to sell at the market.

Attach copies of licenses, permits, certifications or other contractual agreements pertinent to the products you want to sell at the market.

Return to:

Kelly Morris
KSM Marketing LLC
1955 Foxhall Road, McLean VA 22101
703-237-9777 desk/703-307-3944 cell
kelly@ksmmarketing.com