

**Chester Farmers and Artisan Market
2017 Season Vendor Application**



(Please fill out front and back of this form)

Owner Name: _____

Name(s) of co-workers, family, employees who will be at market: _____

Business Name: _____

Mailing Address: _____

Phone: _____

e-mail: _____

Website: _____

Complete farm address (if different from above): _____

I have read and agree to comply with the 2017 Chester Farmers and Artisan Market Rules and Regulations. I have completed the Application and included required current documents for products listed in the Chester Market Product Guidelines. Applications must be complete to be reviewed.

Owner Signature: _____ Date: _____

I give Chester Market permission to release my contact information, including photos of my co-workers, family members and myself, for purposes of public relations, educational and sales opportunities.

Yes ___ No ___ Owner Signature: _____

Return completed application to:

City of Chester
Attn: Chester Farmers and Artisans Market
100 West End Street
Chester, SC 29706

Office Use: Received: _____ Status: _____

What do you want to sell at the Chester Market?

It is important that you list the products you want to sell and the dates available so that the market manager can plan advertisements and answer questions about available produce during the season. We understand that your product availability depends on many things, but please list all items you plan to sell at the market, including the name and projected dates. All products to be sold during 2017 must be listed on the application for approval. New items intended for sale during the season and not listed must be approved prior to selling by notifying the market manager. If you need more space, please feel free to write on the back.

Farmer Product List

Product Name	Grow or Resale	Dates Available

Artisan Product List

Product Name	Description of Product