

Partners for Sustainable Healthy Communities

A 501(c)(3) not-for-profit organization based in Litchfield, CT

P.O. Box 607 • Litchfield, CT 06759 • (860) 567-3890 • www.litchfieldfarmersmarket.org

Vendor Application Form

Litchfield Hills Farm-Fresh Market Indoor 2024-2025 Season

Litchfield Community Center, 421 Bantam Rd., Litchfield, CT

Saturdays • October 26, 2024– June 7, 2025 • 10:00 a.m. – 1:00 p.m.

Litchfield Hills Farm-Fresh Market (LHF-FM) is built on a strong foundation of trust and collaboration. We trust you apply with these ideals in mind. LHF-FM is a CT-Grown market at which farmers sell what they grow, harvest or raise; and vendors of processed products sell what they themselves have produced primarily from CT-grown products. All growers must file a crop plan with the CT Department of Agriculture. All vendors engage in educating the customers about their products.

Name: _____ Farm/Business: _____

Farm/Business Location: _____

Street address city state

Mailing Address: _____

Street address city state zip code

Phone number(s): _____ E-mail: _____

Which of the following best describes your product(s):

- | | |
|--|--|
| <input type="checkbox"/> Fruit and/or Vegetable Producer | <input type="checkbox"/> Fish |
| <input type="checkbox"/> Prepared Foods | <input type="checkbox"/> Eggs |
| <input type="checkbox"/> Dairy | <input type="checkbox"/> Value-added Agricultural Producer |
| <input type="checkbox"/> Meat | <input type="checkbox"/> Producer of baked goods, preserves,
maple syrup and/or honey |
| <input type="checkbox"/> Horticultural | |

Please list the items you plan to sell at the market: _____

I am licensed. I will be licensed by _____ (date). I do not need a license.

Please check if any of the following describes your business practices:

certified organic By whom? _____ organic, uncertified

signer of CT NOFA Farmers Pledge pesticide-free

hormone and antibiotic-free meat and /or dairy non-organic

Intended participation (check all that apply):

- | | | | | | | |
|---------------------------------|---------------------------------|---------------------------------|---------------------------------|-----------------------------------|-----------------------------------|---------------------------------|
| <input type="checkbox"/> Oct 26 | <input type="checkbox"/> Nov 16 | <input type="checkbox"/> Dec 14 | <input type="checkbox"/> Jan 25 | <input type="checkbox"/> March 15 | <input type="checkbox"/> April 26 | <input type="checkbox"/> May 31 |
| <input type="checkbox"/> Nov 2 | <input type="checkbox"/> Nov 23 | <input type="checkbox"/> Dec 21 | <input type="checkbox"/> Feb 8 | <input type="checkbox"/> March 29 | <input type="checkbox"/> May 10 | <input type="checkbox"/> June 7 |
| <input type="checkbox"/> Nov 9 | <input type="checkbox"/> Dec 7 | <input type="checkbox"/> Jan 11 | <input type="checkbox"/> Mar 1 | <input type="checkbox"/> April 12 | <input type="checkbox"/> May 24 | |

Do you need electricity? Yes No If yes, ___amps/volts required for _____

I understand my participation will be contingent on a satisfactory farm visit. By signing this application, I agree that, if accepted, I will abide by the rules, conditions and decisions of the Market.

Date: _____ Signature: _____

Print name: _____