

## 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](http://www.litchfieldfarmersmarket.org)

### Vendor Application Form

**Litchfield Hills Farm-Fresh Market Indoor 2021-2022 Season**

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

**Saturdays • October 23, 2021– June 11, 2022 • 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,<br>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 23 | <input type="checkbox"/> Nov 13 | <input type="checkbox"/> Dec 11 | <input type="checkbox"/> Feb 5    | <input type="checkbox"/> April 2  | <input type="checkbox"/> May 14 | <input type="checkbox"/> June 11 |
| <input type="checkbox"/> Oct 30 | <input type="checkbox"/> Nov 20 | <input type="checkbox"/> Dec 18 | <input type="checkbox"/> March 5  | <input type="checkbox"/> April 16 | <input type="checkbox"/> May 28 | Outdoors 6/18                    |
| <input type="checkbox"/> Nov 6  | <input type="checkbox"/> Dec 4  | <input type="checkbox"/> Jan 8  | <input type="checkbox"/> March 19 | <input type="checkbox"/> April 30 | <input type="checkbox"/> June 4 |                                  |

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: \_\_\_\_\_