

**GODERICH BUSINESS IMPROVEMENT AREA
GODERICH FARMERS' MARKETS
VENDOR APPLICATION AND AGREEMENT
2011 SEASON (May 21 – October 9, 2011)**

NAME _____
(please print)

COMPANY NAME _____
(if applicable)

Phone _____ email _____

Address _____

City/Town _____ Postal Code _____

New Vendor? _____ Previous Vendor? _____ Years Attended? _____

I will attend: For the season (cheque enclosed) _____ Week by week (date to start?) _____

Comments _____

PRODUCT(S) FOR SALE: _____

This will confirm that the applicant has read and has agreed to abide by the attached Goderich Farmers' Markets 2011 Rules & Regulations.

Applicant's Signature _____

**PLEASE COMPLETE AND RETURN TO:
Mr. George Blackwell, Market Coordinator
A & M Foods, 39 Bruce Street East, Goderich, ON N7A 1S7
519 524 6711**

Mailing address: c/o 57 West Street, Goderich, ON Canada N7A 2K5
Tel: 519-440-0871 Fax: 519-524-1466 email: bia@goderich.ca
www.goderich.ca/bia