

2012 Application for Membership

Eno River Farmers' Market

Name _____ Previous Member ___ New Applicant ___

Farm/Business Name _____

Address _____ Town _____ Zip _____

Phone _____ Cell Phone _____

Email _____

Address of Production Site(s) if different than mailing address

Website

Which Market would you like to attend, and for approximately how many weeks?

Please mark all that apply.

Saturday main season market 8 AM to Noon (April through October) _____

Saturday winter market 10 AM to Noon (November through March) _____

Wednesday market 4:00 to 6:00 PM (May through September) _____

*Please indicate if you would be willing to sell on Wednesday only

Product Categories

Please indicate what you intend to sell at Market. Estimate, by category, the percentage of total sales each category represents (total to equal 100%.) For each category that applies to your sales, circle the general types of products that you intend to sell at Market and list individual products as well.

Category 1 estimated % of sales _____

Raw or minimally processed farm products

Raw Vegetables and fruits:

Eggs:

Honey:

Herbs:

Cut Flowers:

Landscape Plants:

Bedding Plants:

Other:

Category 2 estimated % of sales _____

Processed Foods that require a NCDA (North Carolina Department of Agriculture) kitchen inspection. If ingredients used in the products below are harvested from your farm, please indicate which ones.

Baked goods:

Jams, Jellies, Preserves:

Vinegars:

Juices, Coffee, Tea:

Other:

These are products that require more stringent inspections, regulation, and usually refrigeration.

Acidified foods like pickles and relishes (these require the FDA short course certification):

Cheese and other dairy products:

Meat (requires a meat handler's license obtained from NCDA Division of Meat and Poultry):

Fish:

Category 3 estimated % of sales _____

Crafts

Please describe your craft items

New Member Background Information

1. How much area is in production?
2. Do you own the land in production?
3. How long have you been farming/practicing your craft?
4. How long have you produced the products you intend to bring to market?
5. How do you currently market and sell your products?
6. Do you sell at other farmers' markets? If so, please list them and tell how long you have sold there.

Are you certified organic? ____No; ____Yes (include a copy of your most recent certification.)

2012 Full Season Memberships begin on April 1, 2012 and end on March 31, 2013.

- * Please provide a map to your farm or business.
- * Attach an extra page if you need more space for your farm or business description.
- * Provide list of people who will staff your stall and their relationship to the business.
- * If your farm or business requires licensing, attach a photocopy of your current license(s).

* **New Applicant Fee: \$25.** (This fee is non-refundable and due with submission of application to become a new ERFM member.)

* **Annual Membership Fee: \$75.** (This fee is required with submission of applications from returning ERFM members and is due upon application approval from new ERFM members.)

* **Market Stall Fee: \$5-\$8 depending on the length of the market.** (Payable prior to or at each market.)

* **Send application to:**
ERFM
Attn: Vendor Applications
PO Box 487
Hillborough, NC 27278

Email enoriverfarmersmarket@gmail.com with any questions.
Read the Market Rules and By-laws prior to submitting the application!

I acknowledge that I have read the Eno River Farmers' Market Rules and that I will abide by these rules. I understand my membership will be terminated for violation of ERFM Market Rules. I also agree to allow representatives of the Eno River Farmers' Market to visit and inspect the business premises and the products I intend to sell.

Signature of applicant: _____ Date: _____ (Your signature indicates agreement to abide by the by-laws and rules of the ERFM. Further, you attest that you grow, produce or make the goods and services that you wish to sell at ERFM, that a farm or business inspection will be allowed and that you hold all appropriate permits and licenses.)

For Treasurer's Use:

Member Fee Received: Date _____ Check # _____

New Member Application Fee Received: Date _____ Check # _____

Licenses provided? _____