



WWW.UPPERSACOCA.ORG/FARMERS-MARKET

# Fryeburg Farmers Market

Artisan's Application for Participation 2024

U|S|C|A  
UPPER SACO  
CULTURAL  
ALLIANCE



Your Name \_\_\_\_\_

Business Name \_\_\_\_\_

Address \_\_\_\_\_ Town \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Website \_\_\_\_\_ Social Media \_\_\_\_\_

What products do you sell? (check all that apply)

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Soap          | <input type="checkbox"/> Woodwork      | <input type="checkbox"/> Jewelry                |
| <input type="checkbox"/> Balms         | <input type="checkbox"/> Stained Glass | <input type="checkbox"/> Metal                  |
| <input type="checkbox"/> Candles       | <input type="checkbox"/> Painting      | <input type="checkbox"/> Other (please specify) |
| <input type="checkbox"/> Knitted Goods | <input type="checkbox"/> Prints        |   |
| <input type="checkbox"/> Apparel       | <input type="checkbox"/> Sculptures    |   |

Please select day you would like to attend the market

- |                                  |                                    |                                       |
|----------------------------------|------------------------------------|---------------------------------------|
| <input type="checkbox"/> June 23 | <input type="checkbox"/> July 28   | <input type="checkbox"/> September 1  |
| <input type="checkbox"/> June 30 | <input type="checkbox"/> August 4  | <input type="checkbox"/> September 8  |
| <input type="checkbox"/> July 7  | <input type="checkbox"/> August 11 | <input type="checkbox"/> September 15 |
| <input type="checkbox"/> July 14 | <input type="checkbox"/> August 18 | <input type="checkbox"/> September 22 |
| <input type="checkbox"/> July 21 | <input type="checkbox"/> August 25 |                                       |

Please provide a brief description of your operation. Include primary products, scale of operations, years in production and current market for your products. Use a separate page if necessary.

Please provide documentation of any insurance, applicable licenses, permits and certification with your application.

I have read the By-laws of the FFM and the FFM Market Rules and will abide by all rules for the duration of my participation.

I Agree    Signature: \_\_\_\_\_    Date: \_\_\_\_\_

Please return this form electronically to: Fryeburgfarmersmarket@gmail.com  
or by mail: Fryeburg Farmer's Market c/o Walker Hill Farm, 536 Bridgton Road, Fryeburg, ME 04037  
Upon vendor approval monies are due on the first week of the market.  
Please make checks payable to USCA (Upper Saco Cultural Alliance).

For Market Use: Payment Rec'd _____ Date _____ Check# _____ Licenses Provided? _____
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