

FMA Vendor – Market Matchmaking Program
2008 VENDOR APPLICATION
(please fill out all applicable fields)

Name: _____

Business/Farm Name: _____

Address: _____

Municipality: _____

County: _____

Phone Number: _____

Type(s) of Products (please check **and describe** all that apply):

Produce, Fruits: _____

Produce, Vegetables: _____

Value-Added (e.g. salsa, jelly, noodles): _____

Prepared Foods (ready to eat while shopping): _____

Certified Organic/Natural Only: _____

Conventional: _____

Flowers: _____

Bread and other Baked Goods: _____

Crafts: _____

Other: _____

Growing Practices/Certifications (For example: Certified Organic, Naturally Grown, Conventional): _____

Please return completed form by **March 15**
to PAfarmersmarket@gmail.com

OR

Farmers Market Alliance
1204 Malvern Avenue
Pittsburgh, PA 15217



Markets at which you currently sell: _____

Markets at which you are interested in selling (or provide county names if you don't know market names): _____

Days of the week available to sell: _____

Months of year available to sell: _____

Other Comments: _____

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