

Woodford County FARMERS MARKET

VERSAILLES  MIDWAY

2024 Woodford County Farmers' Market Application

NAME _____

FARM/ BUSINESS NAME _____

HOME ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

PHONE _____ CELL PHONE _____

EMAIL _____ Emergency contact _____

Address of Farm(s) where products are grown or raised.

1. Products to be marketed?

Produce

Honey²

Potted Plants

Jam/ Jelly^{1,2}

Cut Flowers

Crafts

Dairy^{1,2}

Canned Products^{1,2}

Eggs²

Baked Goods^{1,2}

Meat (Specify)^{1,2}

Seafood (Specify)^{1,2}

Wine³

Mushrooms

Sorghum²

Other (please specify)^{1,2}

¹Attach copy of Home Base Processor Permit, Microprocessor Permit or General Food Manufacturer /Processor (Commercial) Permit as applicable. A mobile, prepackaged retail sales permit is also required for commercial sales and should be attached.

²Attach copy of typical label.

³Attach copy of ABC license.

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2. Please check the types of produce you plan to sell during the season and write cultivars and varieties under checked boxes when possible.

Potatoes

Hot Peppers

Onions

Eggplant

Carrots

Herbs

Sweet Potatoes

Okra

Summer Squash

Beans

Zucchini

Edamame

Winter Squash

Tomatillos

Tomatoes

Cauliflower

Broccoli

Cucumber

Greens

Garlic

Kohlrabi

Cabbage

Turnips

Pawpaw

Beets

Corn

Apples

Brussels Sprouts

Lettuce

Pumpkins

Peaches

Other (Specify)

Berries (Specify)

Melons

**Produce Best Practice Training
(Yes/No) attach certificate, unless
sampling certificate is attached.**

Sweet Peppers

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3. Describe in detail crafts/arts you plan to sell. Use additional pages, if necessary. Please submit 2 photos of your work.

4. What months do you plan to attend the Market?

May June July August September October

5. What days of the week do you plan to sell at the Market?

Monday Wednesday Saturday

6. How many times each month, when selling, do you plan to attend the market?

Once Twice Three Times Each Weekend

7. Have you applied/ plan to apply to accept the following?

*Must attend yearly training held in the spring of every year.

WIC (Women, Infant, Children) Yes No

Farmers Market Nutrition Program Food Instruments?

Senior Coupons? Yes No_____

These programs are vitally important to many of our customers, if not please explain. _____

8. Are you willing to serve on one of the following committees? Please check:

Grievance Special Market Events

Social Media Farm Visit

11. Willing to serve on the Farmers Market Board of Directors? Yes No

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12. Can your email and phone number be shared with other market members?

Yes No

13. Would your farm or business be interested in being contacted about sponsoring an ad in the Woodford Sun during the season?

Yes No

14. Are you planning on doing sampling?

Yes No If yes, please attach copy of sampling certificate.

15. Have you read the guidelines and by-laws of the WCFM?

Yes No Reading the guidelines and by-laws is a pre-requisite for joining the WCFM

16. Other comments:

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The Board of Directors will review this application and send word of acceptance or denial. If denied, the applicant may apply in following years.

I have read the above and accurately completed the application. I agree to hold the Woodford County Farmers' Market (WCFM) and its agents (The University of Kentucky, the Woodford County Extension Service, and the Board of Directors, both collectively and individually, and WCFM members harmless in any dispute that I may have with any of these entities or individuals. I have read and agree to follow the guidelines and by-laws of the WCFM. I agree to follow the requirements detailed in the 2024 Kentucky Farmers' Market Manual and Resource Guide

(http://www.kyagr.com/marketing/documents/FM_Manual_and_Resource_Guide.pdf). I agree to provide a board member with my total sales at the end of each market (this helps us with grants, double dollars and more and is anonymous).

Signature _____ Date _____

Please mail completed form to:

Woodford County Extension Service
184 Beasley Road
Versailles, KY 40383

Mark "WCFM Application" on the outside of the envelope.

Please enclose a check for \$_____, payable to WCFM, for 2024 market dues, which will be refunded if your application is not accepted. Application will not be considered complete without payment and cannot be approved by the board until it is complete. Note below the enclosures included.

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Enclosed

Sampling Certificate Yes No N/A

Typical* Label-Baked Goods Yes No N/A

Typical* Label-Jams/Jellies Yes No N/A

Typical Label-Dairy/Eggs Yes No N/A

Typical* Label-Dried Products Yes No N/A

Typical Label-Meat Yes No N/A

Typical* Label-Sorghum/Maple Syrup Yes No N/A

Typical Label-Honey Yes No N/A

Typical* Label-Canned Products Yes No N/A

Typical Label-Seafood Yes No N/A

General Food Permit Yes No N/A

ABC Permit Yes No N/A

Retail Foods Permit Yes No N/A

Microprocessor Yes No N/A include list of all farm grown ingredients

Home Based Processor Permit Yes No N/A see note for microprocessor

Food Handler Permit Yes No N/A

PBPT Training Certificate Yes No N/A

Note: PBPT training for the farm is required prior to obtaining a sampling certificate. No PBPT certificate is required if a sampling certificate is enclosed.

Pictures of Crafts Yes No N/A