

Gardener's Corner Grower Information Sheet
Must be completed and turned in at the beginning of Market Day

Market Date Attending: _____

Name: _____

Farm Name: _____ City: _____

Phone: _____ Email: _____

Website: _____

Items to be sold: _____

What is your growing technique?

_____ Conventional _____ Certified Organic _____ Free of Synthetic Chemicals

_____ Sustainable/Naturally Grown _____ Hydroponic

Please refer to the following website for definitions:

www.ams.usda.gov/nop/nop//standards.html

Will you be volunteering on Market Day in the Gardener's Corner Booth? Yes or No

What information would you like published in print/website to advertise your participation: Please check information you would like released

Name: _____ Farm/Business Name: _____ Phone: _____ Website: _____

Office Use:

Indemnity Form Received: _____

Added To website: _____

Notes: _____
