## **Bethlehem Farmers' Market**

## 2020 Vendor Application Form:

Market season: April 30-October 29

Name:_		Email:
Farm/B	usiness Name:	
Mailing	Address:	
Daytim	e Phone:	Evening Phone:
Preferre	ed method/time to conta	t:
Please 1	ist all product(s) you pl	n to sell at the Bethlehem Farmers' Market:
		nd why you would like to participate in the market:
By appl		e Bethlehem Farmers' Market I agree:
• i	That I intend to sell protems, that these will co That I will incorporate susingle-use containers) in That I will commit to particular to pa	producer/maker, operating within the greater Lehigh Valley. Lets I grow or make myself and, if selling prepared/handmade tain locally sourced ingredients to the extent that is reasonable. It tainable practices (e.g., elimination of plastic bags and plastic my market operations to the extent that is reasonable. It icipate for the entirety of the market season and will adhere a sof the market and its host, Lehigh University.
Signat	ture:	Date:
		hemfarmersmarket@gmail.com or via USPS to fice of Sustainability, 516 Brodhead Ave, Bethlehem, PA 18015

Buy Fresh Buy Local chapters in Pennsylvania are coordinated by the Pennsylvania Association for Sustainable Agriculture (PASA), on behalf of our national partner, Food Routes Network.

