

**Downtown St. Elena Farmers Market 2016
Participation Agreement for Farmers and Growers**

Contact Name: _____

Farm Represented: _____

Location: _____

Address: _____

City/State/Zip: _____

Daytime #: _____

Other#: _____

Email: _____

Produce – 50% of produce must be grown/harvested/produced by the participating farmer/grower.

Products to be sold:

All items or produce are subject to approval and acceptance by the COB Farmers Market Committee.

Signature _____ Date _____

Mail to: City of Beaufort, 1911 Boundary St., Beaufort, SC 29902

For info call: Julian Johnson: 843-525-6162