

Date: \_\_\_\_\_

Farm or Business Name: \_\_\_\_\_

KFMA Use only  
DR \_\_\_\_\_  
PT \_\_\_\_\_  
Season \_\_\_\_\_



PO Box 91  
Kennebunk, Maine  
04043

Your Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Physical Address of Business: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_ Texting? \_\_\_\_\_

E-mail: \_\_\_\_\_ Website: \_\_\_\_\_

Facebook: \_\_\_\_\_ Certified Organic \_\_\_\_\_ Accept Credit/Debit cards? \_\_\_\_\_

Please indicate in some way what personal/business information we can or cannot place on our website and brochures:

Products you plan to bring to the market (specify months if applicable) : \_\_\_\_\_

Space Requested (circle one):

Single Space

Double Space

Planned Start Date: \_\_\_\_\_

Planned End Date: \_\_\_\_\_

Please indicate by circling, the weekends you are planning to attend (*try to be specific, however, we realize these are just estimates*)

<b>May</b>	6	13	20	27	<b>June</b>	3	10	17	24	<b>July</b>	1	8	15	22	29
<b>Aug</b>	5	12	19	26	<b>Sept</b>	2	9	16	23	30	<b>Oct</b>	7	14	21	28
<b>Nov</b>	4	11	18												

**\*\*Note: Dues must be postmarked by March 1st. Those that are not, will be subject to a \$25 administration fee and late dues must be received by April 1st, or your spot will not be held. \*\***

*By signing below I certify that I have read the Maine Statute on Farmers' Markets, the bylaws of the KFMA, and the KFM Market Rules and will abide by all rules for the duration of my membership. I will have updated copies of all local and State licenses and certificates, along with a certificate listing: Garden Street Municipal Lot 1 Garden Street Kennebunk, Maine 04048 as the additionally insured on my liability insurance at my booth as well as on file with the KFMA secretary.*

*Insurance, dues and application mailed to: Kennebunk Farmers Market P.O Box 91 Kennebunk Maine 04043.*

I realize that failure to comply may result in my expulsion.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_