

**White County Farmers' Market  
2021 Application**

Name(s): \_\_\_\_\_

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

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

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Farm Address: (If different from above.) \_\_\_\_\_

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1. Please provide a complete list of produce you plan to sell at the market this year. This list will be used during any farm/site inspection. (Attach extra pages if needed and be complete.)

\_\_\_\_\_

\_\_\_\_\_

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2. Please provide a location for the purpose of farm/site location of locally grown produce.

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**The property owner, representatives and/or coordinators of the White County Farmers' Market shall have no liability to vendors, sellers, farmers or persons, for any inaccuracies in any of the services to be performed which may arise, and shall not be liable to the member or related parties for consequential, direct or indirect loss or damages howsoever arising. The signed member shall indemnify the property owner, White County, UGA Extension, or other market representatives and/or coordinators against any business or personal losses or damage suffered as a result of the members failing to comply with its obligations under this agreement, and from participating in the market. The member shall maintain a policy of insurance to cover all their liability for all losses and damages under this agreement. In consideration of acceptance of this application, I waive any and all claims for myself and my heirs against the sponsors, organizers, officials and volunteers of the market for injury that may result directly or indirectly from my participation in this event.**

I agree to abide by the Market Rules (**a copy of said rules have been furnished to me with my application form.**) I further agree that Officials of the White County Farmers' Market will have permission to visit my farm for the purposes of inspecting the produce, fruit, and products I intend to sell. I agree to comply with all Georgia State laws that may apply to my sales at the White County

Farmers' Market. I certify that the products I sell this year at the White County Farmers' Market are grown/produced by me or members of my immediate family, grown locally or in a county approved by the Farmers' Market.

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

**I. If applicable, include a copy of all State licensing with your application**

**a. Georgia Department of Agriculture**

**i. Egg candling certification for selling eggs**

**ii. Live Plant license**

**iii. Organic Food Certification**

**iv. Mobile Meat License**

**b. Health Department**

**i. Kitchen certification for selling baked goods.**

Date Received: \_\_\_\_\_ Date Approved: \_\_\_\_\_ Approved by: \_\_\_\_\_