

Are you a **Certified Organic Farmer**? ___Yes ___ No
If no, do you practice organic farming methods? If so what are they?
(Example: I use rain water only)

Promotions

Please place a check next to the information you would like the Market Off Broad to list in public media (newspapers, website, facebook, vendor lists, etc)

___ Vendor/Business Name ___ Webpage/Facebook ___ Phone No.
___ Email Address ___ Still Photos/Videos ___ Products

Sign and return this form along with your completed product list, a signed copy of the Market Off Broad Rules and Regulations, and a check made out to **Broad Street Events** for your total amount due. **Please also submit all applicable licenses along with this form.**

Name (Print)

Date

Name (Signature)

FOR OFFICIAL USE ONLY

Approved Yes/No

Booth Number _____

Manager _____

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