2024 TURNPIKE PLAZA FARMERS' MARKET

Application for New Vendors & Renewals (Please Print)

1.	Main Contact Person:
	Other Contact(s):
3.	Farm Name:
	Address:
5.	County:
6.	Daytime phone: (Cell phone: ()
	Evening phone: () FAX #:
7.	List the products you intend to sell at the farmers' market:
	(Please refer to Section 7 Vendors, Products and Product Sources of Turnpike Plaza Farmers' Market Program)
	Turnpike Plaza Farmers' Market: New Stanton Sideling Hill Allentown (circle all that apply)
9.	Days of the week you will attend the market
10	. Please describe your farm operation:
:	*Approx. acres in fruitApprox. acres in vegetables & herbs
:	*Acres in other crops
	Farming is our main occupation OR Farming for us is a part-time occupation.
	*If you also run another retail farm market or pick-your-own fields, please describe briefly:
ha Pl	hereby apply to participate in the Pennsylvania Turnpike Plaza Farmers' Market Program. I ve read and understand the terms and conditions stated in the 2024 Pennsylvania Turnpike aza Farmers' Market Program Rules and Procedures and agree to abide by and comply with me.
Si	gnature Date

(MAIL, EMAIL OR FAX TO: Pennsylvania Turnpike Commission, P.O. Box 67676, Harrisburg, PA 17106-7676, Attn: Concession Services | cdefebo@paturnpike.com | Fax 717.986.8707)