

COWETA COUNTY SURPLUS VEGETABLE MARKET

Registration Form

NAME _____

COMPLETE ADDRESS _____

Telephone Number _____

Where your farm/garden is located _____

PLEASE READ AND SIGN THE FOLLOWING STATEMENT:

I certify that the products I will sell at this year's Coweta County Surplus Vegetable Market shall be produced by me or members of my family, and I agree to abide by the rules established for sellers using the market.

Your Signature

Date