

East TN F.A.R.M. Membership Form for Farmers and Gardners

East TN Farmers Association for Retail Marketing, Inc., a Grower/Producer Marketing Association

Member Renewal New Member Single Extra Space Truck/Trailer Space

Today's Date: _____

Applicant Name: _____

Farm Name (if available): _____

Telephone: (____) _____ Mobile: (____) _____ Fax: (____) _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Farm or Grow Area Address (if different from mailing address: _____

City: _____ State: _____ Zip Code: _____

Special directions (if necessary):

Application Fees:

- **Membership Renewal** = \$30 per year before April 30, \$40 after April 30
- **First time applicants (new members) or those whose membership has lapsed for more than one market year** = \$30 annual membership fee (refundable if application is denied) and a \$25 inspection fee (non-refundable)*
- **Single Extra Space** = \$30 per year
- **Four Spaces for a Truck/Trailer** = \$100 per year

*New members are required to undergo an inspection by and approved for membership before allowed to sell at any F.A.R.M. markets (exceptions subject to Board approval.) New member applications must be received by May 15 for consideration. After that date, applications will not be considered for the current calendar year. **New members are also required to provide 2 non-family references that are familiar with their farm operations (see back page).** Please allow two weeks for application to process.

All questions regarding application can be sent to info@easttnfarmmarkets.org

Total Fees: _____

All checks must be made payable to: **East TN F.A.R.M.**

Mail Application and applicable fees to:

**East TN F.A.R.M.
c/o Kathy Chippendale
411 Lone Ridge Lane
Clinton, TN 37716**

Check all categories below that you intend to sell at F.A.R.M. Markets:

(All members must raise, grow, and/or produce all items brought to F.A.R.M markets.)

- Vegetables and/or vegetable plants: _____

- *Honey- Apiary Registration Number: _____
- Cut Herbs
- Fresh Fruit: _____

- Cut flowers
- Eggs
- Value added food (Jellies, jams, and marmalade)
- **Potted herbs, flowers, shrubs, or trees in pots
- **Meat
- **Processed Dairy products (cheese, milk, etc.)
- **Bakery member (bread, muffins, granola, or other baked goods)
- **Processed Foods (Salsa or any acidified foods)

*All Apiary information must be made available to F.A.R.M. representatives

** All cooked or processed foods must be prepared in a certified kitchen and all certification information must be made available to F.A.R.M. representatives

- I agree to abide by the rules and requirements for membership and the by-laws of F.A.R.M. and to abide by the decisions of this organization and its Board of Directors while selling under the auspices of F.A.R.M. If selling by weight, I understand I must use certified scales bearing current TDA inspection sticker. I understand that failure to comply can result in exclusion as an active member.**
- F.A.R.M. share your business information when customers or other vendors inquire**

Signature: _____

Date: _____

New Member Reference Information:

Reference Name: _____

Telephone: (____) _____

Mobile: (____) _____

Reference Name: _____

Telephone: (____) _____

Mobile: (____) _____