



# Elysian

## 2017 ELYSIAN FARMERS MARKET APPLICATION FORM

Name: \_\_\_\_\_ dba: \_\_\_\_\_

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

\_\_\_\_\_

Telephone #: \_\_\_\_\_ Alt Tele #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Please state Full Season or Weekly: \_\_\_\_\_

Describe fully the range of goods you wish to sell: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are you compliant with the "Cottage Law"? \_\_\_\_\_

Market Stall Fee (payable to Market Manager) \$25 season: \_\_\_\_\_ \$10 week: \_\_\_\_\_

Please return to: City of Elysian  
110 West Main Street  
PO Box 246  
Elysian, MN 56028  
507-267-4708  
Lorri@elysianmn.com