**2024 Registration Form**

**Please return to**:

 **Kelly Moore at**

**City of Attalla Municipal Building**

**301 5th Ave. NW, Attalla, Al. 35954**

**Phone: 256-613-9538 email:** **kmoore@attallacity.org**

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_ Zip code:\_\_\_\_\_\_\_\_\_

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_ I agree to allow the Market Manager to conduct a farm visit.

\_\_\_\_ I agree to follow all Market Guidelines by the Alabama Department of Agriculture & Industries and Alabama Cottage Food Law as it applies to me.

I will be selling:

Fruit Vegetables Baked Goods Art Crafts Other \_\_\_\_\_\_\_\_\_\_\_

**FARMERS MARKET DATES & TIMES**

**Kick-off June 6th - September 26th**

**Thursdays – 12pm – 5pm**

*I (we) the applicant(s) do release the City of Attalla of any and all liability for any damage, injury, or loss to any person or goods which may arise, and agree to hold the host harmless of any damage by reason thereof. My signature verifies that I have read the rules associated with this application and hereby agree to comply with said rules.*

Print Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sign Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_

I have read and understand the guidelines attached to this letter and have included a copy of my current

Grower Permit License: Yes No Business License: Yes No