



Vendor Application

Your Name: _____ Date: _____

Business name: _____

Email: _____

Mailing Address: _____

City/State/zip: _____

Website (opt.): _____

Phone: _____ Cell: _____

Products: _____

NC Department of Revenue or EIN tax ID# if available: _____

Farm/produce

premade food

craft

Music

Questions? Call or text: 919-426-2223 or email-
Info@downtownrolesvillefarmersmarket.com