



**EAST GRINSTEAD
TOWN COUNCIL**

Application to attend the Farmers' Market

Business Name:
Contact Name:
Contact Mobile Number:
Contact Email Address:
Contact Address:
Produce to be sold:
If selling foodstuffs, which local authority are you registered with for Food Business:

Declaration: *I hereby declare that all the facts contained within this application form are true, complete and accurate. I also confirm that I will abide by the terms and conditions of East Grinstead's Farmers' Market, and that failure to do so on my behalf will render the Street Trader's Consent null and void.*

Signed:

Name:

Date:

Completed form must be returned to:

Mr Roger Gwatkin, East Grinstead Town Council, East Court Mansion, College Lane, East Grinstead, West Sussex, RH19 3LT.