

**GRAVESEND FARMERS MARKET  
BOOKING FORM  
JANUARY 2010 – DECEMBER 2010**

**Please read and complete all sections of this form**

**BUSINESS DETAILS**

Business Name .....

Organic Licence/Certification Details.....

Other certification: .....

Local Environmental Health Contact (if appropriate) .....

**CONTACT DETAILS**

Producers Name.....

Address: .....

.....post code .....

Telephone Number: Day/Business .....

Evening/home .....Mobile: .....

Fax number: .....E.mail address:.....

Other relevant information: .....

We would like to attend the following markets (please tick appropriate box):

|                        | Yes | No | Space required for own stall or trailer | Electric supply required? |
|------------------------|-----|----|---|---------------------------|
| Friday 8 January 10    |     |    |   |                           |
| Friday 12 February 10  |     |    |   |                           |
| Friday 12 March 10     |     |    |   |                           |
| Friday 9 April 10      |     |    |   |                           |
| Friday 14 May 10       |     |    |   |                           |
| Friday 11 June 10      |     |    |   |                           |
| Friday 9 July 10       |     |    |   |                           |
| Friday 13 August 10    |     |    |   |                           |
| Friday 10 September 10 |     |    |   |                           |
| Friday 8 October 10    |     |    |   |                           |
| Friday 12 November 10  |     |    |   |                           |
| Friday 10 December 10  |     |    |   |                           |

Please advise us of the wattage of your equipment for electricity supply:.....

Miles from Gravesend (straight line) .....

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Please tick one box that describes your core business:

- |  |                           |                          |
|--|---------------------------|--------------------------|
| <input type="checkbox"/> Raw meats and meat products | cheese and dairy products | <input type="checkbox"/> |
| <input type="checkbox"/> fruit                       | honey products            | <input type="checkbox"/> |
| <input type="checkbox"/> vegetables                  | preserves                 | <input type="checkbox"/> |
| <input type="checkbox"/> bread/pastries/baked goods  | drinks                    | <input type="checkbox"/> |
| <input type="checkbox"/> fish                        | eggs                      | <input type="checkbox"/> |
| <input type="checkbox"/> plants/flowers/herbs        |                           |                          |
| <input type="checkbox"/> other please name: .....    |                           |                          |

Produce to be sold at each market , Please list main product first:

| Product description | % of produce on stand |
|---------------------|-----------------------|
|                     |                       |
|                     |                       |
|                     |                       |
|                     |                       |
|                     |                       |
|                     |                       |
|                     |                       |
|                     |                       |

The above information is needed to enable effective advertising of the market and to help minimise conflict between producers caused by an overlap of produce.

Booking for the market does not however guarantee acceptance at the market. By booking for this market you accept that the organisers of the market may request that you refrain from selling a specific product where they feel it would be detrimental to the markets and producers (for example where there are too many producers selling a particular product).

Gravesham Environmental Health Team will be passed a list of producers attending the markets. They may contact you or your environmental health office to confirm you are following the appropriate food and safety standards for your product processes. This particularly applies to high risk processes.

Should you have any questions on any section of this form or have a query not covered here please do not hesitate to contact us.

To ensure prompt processing of your application please:

- Complete all sections of this form and enclose a recent copy of your Public Liability Certificate
- Sign and date below

Signed: ..... Date .....

Please return this form to: *M. Farmers Markets Ltd, 2 Aldington Cottages, Pilgrims Way, Thurnham, Maidstone, Kent ME14 3LN tel no 07775 736116 e.mail [meophamfmkt@aol.com](mailto:meophamfmkt@aol.com) or [www.myfarmersmarket.co.uk](http://www.myfarmersmarket.co.uk)*