

KALAMUNDA FARMERS MARKET

Expression of Interest

I (Contact Name) _____
 of (Business Name) _____, acknowledge I am
 the primary stallholder.

My contact details are:

Phone _____ Fax _____
 Mobile _____ Email _____
 Business Address _____
 Postal Address _____

Product Details:

My product is _____
 It is ideal for the Kalamunda Farmers Market because: _____

(Attach further sheets if necessary)

The product stated above has been formally certified as: (Please tick all applicable)

Organic Other (please specify) _____ (attached)
 Biodynamic
 Chemical Free I have attached copies of my certification certificates:

I would like to attend the markets on the following basis;

Weekly Monthly
 Fortnightly Seasonal

I would like to commence selling my product at the Farmers Market from _____
 (Insert Date – must be a Sunday)

Note: All applicants MUST complete the attached calendar relating to the availability of their product.

Declaration

I have completed the calendar of when my product will be available and attached all required certificates. I am aware if I intend to change or add produce to my stall, that I should contact the Market Manager as soon as possible before the next Market Day to discuss the possibility of selling the product.

Also, if I feel a fellow stallholder's product is not representing the Kalamunda Farmers Market correctly, my concern is to be noted in writing and handed to the Market Manager for consideration.

I have read and understand the Kalamunda Farmers Market Rules and agree to abide by them.

I acknowledge having received the ANZFSA Fact Sheets in respect to Food Labels and realise I am solely responsible for ensuring I meet the requirements set out on this fact sheet.

I acknowledge that I am solely responsible for ensuring my stall is registered as a Food Stall and certified to meet the criteria as set by the Kalamunda Shire Council.

Signed _____ Date _____

Completed forms should be sent to;
 Kalamunda Farmers Market, PO Box 417, Kalamunda WA 6926
 Or Email: farmersmarket@kalamundachamber.com

KALAMUNDA FARMERS MARKET
Stallholder's Product Availability Calendar

		Qty
January		
February		
March		
April		
May		
June		
July		
August		
September		
October		
November		
December		

*Please complete for the whole year, stating anticipated quantities, Thank you.