



Application for Stallholder Membership of Barossa Farmers Market

Contact Details

Registered Business Name: _____
ABN (if applicable): _____
Production Address: _____
Name of contact person: _____
Postal Address: _____
Contact Number: _____ Mobile Number _____
Email: _____ Website address _____

1. For fresh produce growers:

Please provide a full list of all produce, across all growing seasons that you intend to sell at the Barossa Farmers Market:

2. Organic Producers: Please provide a copy of your current organic certification. If you are an organic producer without certification, please provide a detailed summary of your agricultural practices (ie biodynamic, permaculture principles).

3. Non-organic Producers: Please provide a summary of all chemicals used on your property.

4. For Value-added producers:

Please complete the Product and Ingredient matrix on the next page. You will need to show the full list of ingredients for each product sold, and where those ingredients are sourced from. Where appropriate, please indicate where ingredients are certified organic or biodynamic.

You will need to provide evidence of the purchase of your raw ingredients from the suppliers noted. For example, copies of receipts, orders or delivery slips are acceptable. Scanned copies or photocopies are acceptable.

Name of Product	Ingredients	Source of Ingredient	Certified Organic? Note ACO number
Apple Cake	Flour	Four Leaf Milling (BFM Stallholder)	Yes. ACO # 12345
	Sugar	Co-op Nuri	No
	Butter	Co-op Nuri	No
	Apples	The Wild Apple (BFM Stallholder)	Yes. ACO # 56789
	Eggs	Marie Waechter (BFM Stallholder)	No

All applicants:

Please attach a copy of your product liability insurance cover. You will not be able to trade or attend the market until a copy of your current insurance note has been provided to the Market Manager.

Council Registration Number for food businesses: _____

(NOTE: All stallholders must be registered with their local council as a food business before they can commence trading)

Have you done any Food Safety Training? (please circle) YES NO

Please attach a copy of any training certificates.

General Information:

How often do you intend to attend the Barossa Farmers Market? _____

Who will be manning (or womanning!) your stall? Please provide details of how they are connected with the production of your produce/products. Please note, if an employee of your business will be attending the market they must be fully conversant in the origins and processes involved with the growth or production of your product:

Subject to approval, when would you first like to attend the Barossa Farmers Market? _____

By signing below, please indicate that you have read and understood the Barossa Farmers Market Guidelines and Philosophy and Rules and Regulations and that you undertake, as a member of the Barossa Farmers Market, to accept and abide by these Rules.

Further, by signing below, you agree that the information provided in this application form is true and correct. You understand that false representations made in this application form may result in the Barossa Farmers Market Inc. revoking your membership.

Signed **Date**.....

Please return this completed application to:
Barossa Farmers Market PO Box 517 ANGASTON SA 5353
OR
info@barossafarmersmarket.com