

First Name:

Last Name:

Company Name:

Work Phone:

Email Address:

Mailing Address:

City:

State/Province:

Postal Code:

Your web site (if applicable):

What do you grow/harvest? (click all that apply)

vegetables

fruit

herbs

fish/shellfish

eggs

meat

Other (please specify)

Please indicate where and when people can find your products (i.e. MWF, 8-2, Farm Stand, 5555

Main Street, Barnstable; Saturdays, 9-12, XYZ Farmers' Market)

Please include a short description of your business to be used on buyfreshbuylocalcapecod.org and in the printed guide.

Social media accounts (if applicable):

Will you be accepting SNAP/HIP at your farm stand and/or at a farmers' market?



Grower Survey