

Mt. Fresh Produce Association Website Listing Form

If you **do not** want your information listed on the Internet, **do not** complete this form. **Only** complete the information you would like to see on our web page. Leave the other parts blank.

General Information

Farm Name: _____

Farmers' Names: _____

Mailing Address: _____ Farm Address (if different): _____

Phone: _____ Fax: _____

Email: _____ Website: _____

Farmers Market Activities

Check the farmers markets you plan to attend and **circle** the months you will attend:

_____ Wednesdays in Oakland: June – July – August – September – October

_____ Saturdays in Oakland: June – July – August – September – October

_____ Other: _____ May – June – July – August – September – October

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Items you sell at the Farmers Markets: (circle all that apply)

Produce: Vegetables Fruits Berries Herbs

Homemade: Baked Goods Jams/Jellies Gift Baskets Crafts/Personal Care: _____

Plants: Cut Flowers Live Plants

Misc: Maple Syrup Honey Corn Shocks Gourds Decorative Pumpkins

Other: _____

On-Farm Activities

Are visitors welcome to tour your farm? Yes No

If yes, what is the schedule or how to make reservations: _____

Do you have an on-farm stand where you sell products? Yes No

If yes, Days/Dates Open: _____

Hours of operation: _____

Items sold: _____ Same as at Farmers Market _____ Others: _____

Directions to your farm: _____

Other Information – Can include brief farm history, bulk ordering information, etc.

