





BRIGANTINE FARMERS MARKET 2024 SEASON

Young Entrepreneurs' Application - One Page

Child's Name:			Age:	Date:
Parent/Guardians' Name:				
Business Name:				
Address:				
Phone:	Cell Pl	hone:		<u> </u>
Email Address:				
For Profit	Non Profit			
Goods for Sale	Service			
Signature of Applicant:		Print Name:		Date:
Parent/Guardian Signature:		Pr	int Name:	
Price Point for products	or Fees for Services: _			
Please indicate 3 dates t	hat you are available f	or the Market betw	een July 13 -	August 31 in order of preference:
1 2	3	_		
	• •		nay be given t	he opportunity to be at the Mar-
ket for 1, 2, or 3 dates d	epending on the num	ber of applicants.		
	communicate your pr	oduct or business.	This material	t signage, promotional materials, may be used in Market advertising
Email:		Or M	ail/Hand Deliv	ver to:
The Brigantine Farmers	Market Committee	City of Brigan	tine – Attn: Fa	rmers Market
<u>BrigantineFarmersMarket</u>	@gmail.com	1417	West Briganti	ne Avenue

Application will be accepted from June 1, 2024 - June 20, 2024.

Subject Line: Young Entrepreneurs

Brigantine, NJ 08203