**East TN F.A.R.M. Artisan Special Membership Form**

**East TN Farmers Association for Retail Marketing, Inc., a Grower/Producer Marketing Association** Date_____

Please add a detailed Map or directions on the reverse side so we can find you.

(please check one) _____New Applicant_____ Renewal

* First time applicants (new members) or those whose membership has lapsed for more than one year, must submit application, along with $20 membership fee (refundable if application is denied) and a one-time, non-refundable $35 jurying fee, be juried, and approved for special membership before they are allowed to sell at any F.A.R.M. markets (exceptions subject to Board approval.) Please allow two weeks for applications to process. All questions regarding application can be sent to farmsecretary1@gmail.com. **The annual membership is $20. Renewal applications are $20 until April 30. After April 30, renewal applications are $40. New member applications must be received by June 1 for consideration. After that date, applications will not be considered in the current calendar year.**

Name:_____County_____

Mailing address:_____City/State:_____Zip_____

Address of Artisan area if different from mailing address: _____

Telephone: (_____) _____Email:_____

Fax: (_____) _____ Cell phone(_____)_____

Please see the Artisan Rules on our website easttnfarmmarkets.org for a list of natural materials that will be considered during the jury process.

List and describe the items you wish to sell in detail. Provide 5 high quality photos (prints or digital to farmsecretary1@gmail.com) of your work. Examples of what you plan to sell at Market must be juried and photographed. Please use the back of the page or additional pages if needed.

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

(Artisan Members using natural materials in their work will be given priority.)

By signing this application I agree to abide by the rules and requirements for membership and the by-laws of F.A.R.M. and to abide by the decisions of this organization and its Board of Directors while selling under the auspices of F.A.R.M. I understand that failure to comply can result in exclusion as a Special Member.

Signature:_____Date:_____

New Members (first time sellers) must supply 2 references (non-family members) that are familiar with your art and operation.

Name:_____Telephone:_____

Name:_____Telephone:_____

**** Make checks payable to East TN F.A.R.M. ****

Mail application, $20 Membership dues, and $35 Jury Fee (if applicable) to: East TN F.A.R.M.

c/o Betsy Wilson, 829 Ridgeview Drive Clinton, TN 37716