



COASTAL DISCOVERY MUSEUM

Experience The Lowcountry Up Close

Coastal Discovery Museum Farmer's Market Application

2018 Tuesdays 9 am to 1 pm October to June

Food Vendor Application

(Food that have been altered from its raw or original state)

This form must be completed prior to participation in the Market.

Name of Business: _____

Name of business owner: _____

Mailing address: _____

City: _____ State: _____ Zip Code: _____

Cell Phone: _____ Phone: _____

Email Address: _____ Website: _____

Business Address (if different from above): _____

Months during which you plan to sell at the market: _____

Forms of payment you will accept: Cash: _____ Credit/Debit: _____ Check: _____

Other (WIC, SNAP, VENMO, PayPal, etc): _____

DHEC Certification: _____ SC Dept. of Agriculture Certification _____

Kitchen Location: _____ State: _____ Zip: _____

Kitchen owner: _____ Phone: _____

I understand and certify that 100% of the products that I offer for sale at the Hilton Head Island Farmers Market will be produced by me, my family, and /or my employees for direct sale to the public. I further certify that all such products are produced in accordance with all laws and regulations of Beaufort County and the State of South Carolina governing food production and distribution.

Items you intent to sell at the Market:

The Coastal Discovery Museum’s mission is “ To Inspire People to Care for the Lowcountry” as part of our mission full fitment we intent for the Hilton Head Farmers Market to be a venue for Lowcountry farmers to bring their product to local consumers, in order to stimulate the local agricultural economy and promote sustainable responsible products.

I have read and agree to comply with the Hilton Head Farmers Market Rules and Regulations and the SCDHEC Farmers Market Guidelines. I understand its violations and sanctions, including grounds for suspension and disqualification. I understand that this is not a contract for entry into the Market and that the Coastal Discovery Museum must approve my application before I can participate in the Market.

Signature: _____ Date: _____

Please send your completed application to:

Carlos Chacon
Manager of Natural History
Coastal Discovery Museum
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Hilton Head Island, SC 29926
(843) 689-6767, Ext 226
cchacon@coastaldiscovery.org