



TOWN OF DEERFIELD

Board of Selectmen & Board of Health
8 Conway Street
South Deerfield, MA 01373
Voice: 413.665.1400
Facsimile: 413.665.1411
Website: www.deerfieldma.us

FOOD SAMPLE VENDOR REGISTRATION FORM

Please submit **ONE** form per event.

Summer Craft Fair

Will offer product samples at our booth Yes or No

Fall Craft Fair

Will offer product samples at our booth Yes or No

Registrant's Name and Address:

First/Last Name _____ SSN/FID #: _____

Business Name _____

Address _____

Telephone #: _____ Fax #: _____

Description of pre-packaged food items to be sold at the Old Deerfield Craft Fair: _____

Location of kitchen where food is prepared and packaged: _____

Type of license or permit granted for certification and inspection of preparation and packaging kitchen/facility: _____

Registrant's Signature

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For Inspections Department Use Only

Approved

Richard Calisewski, Board of Health Agent

Denied

Reason: _____

Please attach a photocopy of your kitchen certification and inspection report to this form for our records.