## Downtown Johnstown Farmers Market Vendor Certification

Business/Establishment/Entity Name  Street Address		
I certify that I am fully and legally authorized to sign of business/establishment/entity. I further certify that I has Downtown Johnstown Farmers Market Rules and Regulations put forth and understand that any violations in the removal of the above-named business/establishment from re-entering for a term to be determined by the orgagents, contractors, and/or representatives above named be subject to these rules and regulations.	ve received and reviewed a ulations. I agree to follow the s of these rules and regulation nent/entity from the market ganizers. I certify that all en	copy of the nese rules and ons may result and suspension uployees,
Printed Name:		
Signature:		