



**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](http://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.**