

Marion Locally Grown Request Form

Name: _____

Date: _____

Farm Name: _____

Phone #: _____

Mailing Address:

Farm Physical Address (if different from mailing):

Email: _____

Crops being grown for sale all year:

_____ _____ _____
_____ _____ _____

Directions to Farm (from Ag Center/Hwy441):

Time and date of appointment (office use only)
