



2025 MEMBERSHIP APPLICATION

**Memberships run from January 1 – December 31 and cost \$45 annually.
Your membership will renew on January 1, regardless of the date you joined.**

Name of Market _____ **Email** _____

Market Manager _____ **Website** _____

Market Address _____ **Facebook Site** _____

City _____ **Zip** _____ **Season Open** _____

County _____ **Days of the Week Open** _____

Mailing Address _____ **Hours Open** _____

City _____ **Zip** _____

County _____

Market Mgr. Phone _____

Alternate Phone _____

Please check all that your market accepts:

- ☐ **Credit**
- ☐ **Debit**
- ☐ **Senior Vouchers**
- ☐ **WIC Voucher**
- ☐ **SNAP**

RETURN COMPLETED APPLICATION AND PAYMENT

Check or money order should be made payable
to **SC Association of Farmers Markets** and sent to:

South Carolina Association of Farmers Markets
Attn: Anne Nidiffer
P.O. Box 11280, Columbia, SC 29211
anidiffer@scda.sc.gov

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an internet browser.*