

PRODUCER INFORMATION

Please fill out the following application and sign the **Meatworks Terms of Service**.

FARM NAME:					
OWNER:					
CITY:		STATE:	Z	IP:	
EMAIL:					
PHONE:		CELL PHON	_ CELL PHONE:		
	wer the following ir our information will			erve our region's farms. LI/Meatworks.)	
Years Farming: <i>(Circle one.)</i> 0-3 3-5		5-10	10+	20+	
What livestock do you raise for slaughter at Meatworks? (Circle all that apply.) Beef, dairy			Approx. how many per year?		
Beef, meat					
Pigs					
Lamb					
Goats					
Describe your	management s	ystem: <i>(Circle</i>	e one.)		
Conventional	Grass-fed	Non-certified	organic	Certified Organic	
How many acr	es do you own	? Ren	t?		