

To complete your membership reservation for the Eldredge Farm CSA Program you must submit payment with a signed pledge form to this address:

Eldredge Farm
P.O. Box 1012
S. Dennis, MA. 02660

Primary Shareholder _____ Co-shareholder _____

Address _____ Zip _____

Cell # _____ Home # _____

Primary email _____ Co-share email _____

(Email (eldredgefarmcsa@gmail.com) will be our primary form of communication – please let us know if you don't have email access so we can set up alternate means of contact.)

My preferred pickup day is (circle): **Monday** **Tuesday** **Thursday** **Friday**

I am enclosing an \$800.00 check payable to Eldredge Farm (check # _____) for a full membership.

I am enclosing a \$400.00 check payable to Eldredge Farm (check # _____) for a ½ share membership.

By signing below, I agree to participate as a member in the Eldredge Farm CSA Program at Eldredge Farm. The program entails sharing the benefits and risks of small-scale agriculture. In becoming a member of the Eldredge Farm CSA, I understand the following:

- I am making a financial commitment for the Eldredge Farm CSA season. As the designated primary shareholder, I understand that my share payment is non-refundable.
- I recognize that due to the inherent risks of farming, there are no guarantees on the exact amount of produce that I will receive.
- I understand and accept this commitment and assume responsibility to contact the staff if there are any questions or concerns.
- I agree to pick up my share every week for the duration of the 16 week season, or make alternate arrangements in advance.

Signature _____ Date _____