

Roots Farm CSA Membership Application

Name: _____
Address: _____
Phone #: _____
e-mail: _____

Payment Choice: (We require a \$50 non-refundable deposit minimum to hold your place as a CSA member. Full payment is encouraged at application. We also have a split payment option with the first half due by April 30 and the second by May 31. Please indicate your payment choice below.)

- ___ \$390 (includes deposit and whole payment)
___ \$195 (includes deposit and first half of payment)
___ \$50 deposit (required, non-refundable)

Weekly pick up day:

- ___ Tuesday afternoons (3-7pm)
___ Saturday mornings (9am-12pm)

I am interested in helping with:

- ___ Tuesday morning harvest
___ Friday afternoon harvest
___ Weekend workdays
___ Other working options since none of the above suit my needs.

Agreement:

I understand that by being a member of Roots Farm CSA, I am supporting sustainable agriculture and strengthening the local food supply. As a member of a CSA, I know that I share in the risk and abundance of farming with other members of the community and the farmers.

SIGNATURE _____

DATE _____

Please mail your completed form and a check or money order (payable to *Roots Farm*) to:

Roots Farm CSA
46 Beaver Trail
Winterville, GA 30683

Questions? Call us at (706) 742-0010 or e-mail info@rootsfarm.org

Thanks for joining!