

Cedar Rock Gardens 2019 CSA Enrollment Form



Contact Information

Name(s)	
City	
Phone	
E-Mail Address	

Please initial each of the following:

_____ I understand I am committing to become a member of **Cedar Rock Gardens'** 2019 CSA Program, that my deposit is non-refundable once I am accepted as a share member, and I shall share in the risks and rewards of the Share program. I am comfortable with the fact that I will receive a variety of crops, but I may not get every crop that is on the farm's production list due to crop failures or low yields.

_____ I agree that it is my responsibility to pick up my share each week at **Cedar Rock Gardens** in Gloucester, MA on the designated pickup day, and that any share not picked up during that time will automatically become the property of **Cedar Rock Gardens**, that there are no refunds or repeats for missed shares.

Please sign this contract here:

Signature: _____ Date: _____

Please return this contract with your check, (made payable to Cedar Rock Gardens). A deposit of \$100 is required with this application; the remaining \$550 is due at the first share pick up on June 5th, 2019.

How did you hear about us? _____