

CSA SIGN UP

Polasky's Farm Market CSA Agreement Form 2011

Household1

Name _____
Address _____
City _____
Zip _____ Phone _____
E-Mail _____

Household 2 (Fill out if you split your share)

Name _____
Address _____
City _____
Zip _____ Phone _____
E-mail _____

Product Offerings please select from the list below

Full Poultry share –	350.00 _____
Half Poultryshare –.	175.00 _____
Beef Share –	365.00 _____
Beef/poultry combination -	540.00 _____

TOTAL _____

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PICK UP LOCATIONS

OSHKOSH – Pick up will be at our market booth at the Oshkosh farmers market between **8:30 am** and **12:30 pm**
Saturdays

Fondulac – Pick up will be at the **Wednesday** Farmers market on Division street across from St Pauls church between **2:00 pm** and **6:00 pm**

RIPON – To be determined

A receipt of your order and directions to pick up sites will be sent to you when your order is processed.

I would like to be a shareholder in Polasky's Farm Market CSA Program. I understand that the farm workers will do their best to provide all they have promised, and I agree to excuse them for the mishaps that might trip them up. I understand that this is a season-long contract and Polasky's farm market will transfer my share to an individual of my choice if I must terminate my membership.

Signature Date

Enclose payment and mail to:

Polasky's Farm Market, PO BOX 373, Ripon, WI. 54971

Phone: 920-290-1940 or info@polaskybrandproduce.com