2010 Moose Hill Community Farm Registration Form

PLEASE PRINT CLEARLY

Name_____

Address_____

Town_____ State_____ Zip_____

Phone_____

MAS membership # _____ Expiration date _____

E-mail_____(REQUIRED for communications and Farm Updates)

I understand that Mass Audubon's Moose Hill Wildlife Sanctuary is accepting my payment and thereby my membership in the 2010 CSA season. I recognize that there is no guarantee on the exact amount of produce I will receive for my share price. In joining the farm, I am committed to learn the risks and rewards of farming by accepting fluctuations in the harvest caused by nature. Most produce is provided June-October. **I agree to contribute eight hours of volunteer assistance during the growing season, and will sign up for shifts once they are announced.**

Special Mass Audubon membership offer! To help involve more people in our important conservation work in Sharon and across Massachusetts, first year CSA members who are not already Mass Audubon members will receive a one year Family or Individual membership for only $29 as part of their share purchase price!

Full Share (feeds approx. 4 people)
_____**$600** CSA Registration Fee for Mass Audubon Member
_____**$629** CSA Registration Fee for **First Time Audubon Member only**
Includes 1 year Mass Audubon membership

Single Share (Half the size)
_____**$350** CSA Registration Fee for Mass Audubon Member
_____**$379** CSA Registration Fee for **First Time Audubon Member only**
Includes 1 year Mass Audubon membership

_____ I will be a NEW Mass Audubon Member at $29

_____ Renew my current Audubon membership for an additional 12 months at $58

CSA members need to be current Mass Audubon members through December 2010

Choose One Option and TOTAL

_____ I am enclosing non-refundable deposit of $200

_____ I am enclosing the entire amount of $_____ (According to Share Choice)

_____ TOTAL (Include membership fee)

Make checks payable or provide VISA/MasterCard information and send to:
Moose Hill CSA, Mass Audubon, 293 Moose Hill Street, Sharon, MA 02067

VISA/MC Card Number_____

Expiration Date_____

Signature (as on card) _____ Date_____

The balance is due by April 1, 2010. A late fee of $15 will be charged after this date.
If you are paying by credit card, your balance due will automatically be charged on April 1, 2010, unless you notify us otherwise. If paying by check, it will be your responsibility to mail CSA the balance by April 1, 2010.

Pickup Day Option
Choose 1st & 2nd Choice (First come basis, when pick up time is filled, 2nd choice option will apply)
_____ Monday 4-7 pm _____Wednesday 4 -7 pm _____Friday 4 -7 pm. _____Saturday 10-12