



**Stony Hill Farms
Canco Lofts
2017 CSA Application
Session Two Enrollment
February 1st-April 30th**

Applicant Information (please print clearly)

Last Name* _____ First Name* _____
Canco Loft Apt #* _____ City: Jersey City State: NJ Zip* _____
Phone* _____ E-Mail* _____
***required**

Jersey City Canco Lofts –Season: June 13th – November 21st (23 Weeks)

- Your share will be delivered on **Tuesday** afternoons to the front desk of your apartment building
- Deliveries will take place on Tuesdays afternoon **between 1pm – 8pm**
- Your name will be marked on your share box and left with your doorman.

Payment

Payment may be in the form of:

- Check (No. _____) Made out to: *Stony Hill Farms*
 Credit Card: Visa Amex MasterCard Discover (Expiration Date: _____)
We will call you for payment when application is received

Please select share option below*

Half Share: \$552.00	Full Share: \$851.00
Half Share with Half Dozen Eggs: \$621.00	Full Share with Half Dozen Eggs: \$920.00
Half Share with Dozen Eggs: \$655.50	Full Share with Dozen Eggs: \$954.50

Disclosure Statement*

I understand that although the farmer is dedicated to the best of his ability to provide fresh, high quality produce, there are risks in agriculture which need to be shared by the whole community and may be echoed in the yield of certain crops. The size and quality of certain fruits and vegetables may be affected by the weather and other factors that are beyond the control of the farmer. By submitting this application, I understand that my membership payment entitles me to a weekly share of fresh harvested produce from Stony Hill Farm Market during the 2017 CSA growing season. Stony Hill Farms is not liable to the improper handling of shares after delivery. If I am unable to pick up my share on a specific day, I must notify stonyhillcsa@gmail.com before 9am the day of delivery. There will be no make-up days for shares that are not able to be picked up. Memberships are non-refundable.

***Signed** _____ **Date** _____
Printed _____

Mail or Bring Completed Application with Payment to:
Stony Hill Farms
 Attn: CSA
 8 Route 24
 Chester, NJ 07930

Farm Use Only

Date Application Received: _____ Date Payment Received _____ Received By _____
 Check- No. _____ Amount _____
 Credit Card (Circle One)
 Visa / American Express / MasterCard / Discover Expiration Date _____
 Profile Sign-In Roster Order E-Mail Confirmation Membership Card # _____