



Community Supported Agriculture 2020 Membership Form

First name _____ Last name _____

Street _____

City _____ State _____ Zip _____

Phone _____

Email _____

Please print email address clearly, as this is the primary method of communication

Farm share options Cost Payment Option (circle one) Amt paid

SUMMER SHARE – on-farm Full size	\$600	\$600 OR \$300 deposit	\$
SUMMER SHARE – on-farm Half size	\$400	\$400 OR \$200 deposit	\$
SUMMER SHARE – Labyrinth Brewing Half size	\$400	\$400 OR \$200 deposit	\$
FALL SHARE – on-farm Full size	\$300	\$300	\$
FALL SHARE – on-farm Half size	\$200	\$200	\$
FALL SHARE – Labyrinth Brewing Half size	\$200	\$200	\$

TOTAL \$ _____

Please make your check payable to Cloverleigh Farm and send with this completed form to:
Cloverleigh Farm 336 Mansfield City Rd. Mansfield Center, CT 06250

SELECT PICK UP DAY & TIME: _____ WEDNESDAYS 3-6pm at the farm
_____ THURSDAYS 5-7pm at Labyrinth Brewing Co. Manchester
_____ SATURDAYS 9am-12pm at the farm

Your farm share will be available on the day you select. If you will be away, please consider sending a friend or family member to pick up your share or change your pickup day for that week. Any uncollected shares will be donated.

MEMBER COMMITMENT:

Cloverleigh Farm strives to deliver a generous supply of diverse, high quality, and flavorful produce each week. Becoming a member of the farm requires that you understand and accept the seasonality and risk associated with farming. This is what being a CSA member is all about! Thanks for joining us and sharing the journey.

Member Signature _____

Date _____

Happy to have you as a member and look forward to a great season ahead!