



CROMWELL VALLEY CSA
Community Supported Agriculture

P.O. Box 9707
Baltimore, MD 21284
membership@cvcsa.org
www.cvcsa.org

2010 Commitment Form

Name			
Address			
City, Zip			
Phone	()	Other Phone	()
Primary E-Mail*		Other E-Mail*	

1. Please print

Have you participated in the CVCSA before? If so, when? If not, how did you hear about the CSA?

*E-mail is our primary means of communication for CSA correspondence (billing, membership, events). This helps us save paper, postage, and time. You may include other email addresses if you share your produce with others.

2. a. Portion Type, Price and Commitment to Volunteer:

- Regular portion \$575.00 + least two 3-hour work sessions**
 Regular portion \$650.00 (no work sessions)
 Small portion \$325.00 + at least one 3-hour work session
 Small portion \$375.00 (no work sessions)

b. I wish to be considered for a work exchange and I will contact membership@cvcsa.org:

- If I am **NOT ACCEPTED** as a work exchange **I would like a portion and have enclosed my full payment check** to hold my place. If I am accepted, my check will be returned to me.
 If I am not accepted as a work exchange I do not wish a portion.

3. Preferred pick up day: **Tuesday 2 PM – 7 PM** **Saturday 2 PM – 6 PM**

4. I understand this is a commitment to SHARE THE RISK of unpredictable harvests and enjoy the surplus of abundant harvests. I also understand there is NO refund policy. Any returned checks will incur an additional \$40 fee.

Make checks payable to Cromwell Valley CSA and mail to the above address.
Only FULL payments will be accepted.

Total Enclosed \$ _____

Signed _____

Date: _____

This is a contractual obligation so please keep a copy for your records.