

_____ I agree to pay **\$129.00 per month** in SNAP benefits from my June 2020 or _____ (starting month) issuance through my October 2020 issuance for a *Summer Farm Share* (average of 10-12 items of produce per week).

_____ I agree to pay **\$109.60 per month** in SNAP benefits from my June 2020 or _____ (starting month) issuance through my October 2020 issuance for a *Small Summer Farm Share*.

_____ I agree to pay **\$44.00 per month** in SNAP benefits from my June 2020 or _____ (starting month) issuance through my October 2020 issuance for a *Summer Fruit Share* (average ranging from 1 pint berries to 1 melon or 10 apples per week). You must have a vegetable share to purchase a Summer Fruit Share.

_____ I agree to pay **\$24.00 per month** in SNAP benefits from my June 2020 or _____ (starting month) issuance through my October 2020 issuance for a *Summer Mushroom Share*.

_____ I agree to pay **\$90.00 per month** in SNAP benefits from my November 2020 benefit issuance through my December 2020 issuance for a *Fall Farm Share* (NOV & DEC only) (average of 10-12 items of produce per week).

_____ I agree to pay **\$34.00 per month** in SNAP benefits from my November 2020 benefit issuance through my December 2020 issuance for a *Fall Apple Share* (NOV & DEC only) (10 pounds of apples/week). You must have a vegetable share to purchase a Fall Apple Share.

_____ I agree to pay **\$24.00 per month** in SNAP benefits from my November 2020 or _____ (starting month) issuance through my December 2020 issuance for a *Fall Mushroom Share*.

_____ I agree to pay **\$53.50 per month** in SNAP benefits from my April 2020 or _____ (starting month) issuance through my May 2020 issuance for a *Spring Farm Share*.

OR

Partial Payment with SNAP Benefits:

_____ I agree to pay \$_____ in SNAP benefits per month from my June 2020 or _____ (starting month) issuance through my October 2020 issuance as a partial payment towards the total monthly cost of my *Summer Farm Share* (**\$129**). I will pay the remaining balance \$_____ to *Red Fire Farm* in cash, check or credit card (if available).

_____ I agree to pay \$_____ in SNAP benefits per month from my June 2020 benefit issuance through my October 2020 issuance as a partial payment towards the total monthly cost of my *Small Summer Farm Share* (**\$109.60**). I will pay the remaining balance \$_____ to *Red Fire Farm* in cash, check or credit card (if available).

_____ I agree to pay \$_____ in SNAP benefits per month from my November 2020 benefit issuance through my December 2020 issuance as a partial payment towards the total monthly cost of my *Fall Farm Share (\$90.00)*. I will pay the remaining balance \$_____ to *Red Fire Farm* in cash, check or credit card (if available).

_____ I agree to pay \$_____ in SNAP benefits per month from my June 2020 or _____ (starting month) issuance through my October 2020 issuance as a partial payment towards the total monthly cost of my *Summer Fruit Share (\$44.00)*. I will pay the remaining balance \$_____ to *Red Fire Farm* in cash, check or credit card (if available). You must have a vegetable share to purchase a Summer Fruit Share.

_____ I agree to pay \$_____ in SNAP benefits per month from my November 2020 issuance through my December 2020 issuance as a partial payment towards the total monthly cost of my *Fall Apple Share (\$34.00)*. I will pay the remaining balance \$_____ to *Red Fire Farm* in cash, check or credit card (if available). You must have a vegetable share to purchase a Fall Apple Share.

If I cannot pay the full balance of my CSA share, Red Fire Farm will change the amount of produce in my share, equal to the amount of what was deducted from my SNAP benefit.

II. I understand that:

- The amount I agreed to above will be automatically deducted from my EBT account on the date that I receive my SNAP benefits.
- I will receive farm produce weekly June through the week of October 19; bi-weekly in November and December; and bi-weekly in January, February, and March.

Please check one of the following pick-up options - Locations subject to change:

_____ BOSTON at the Boston Wine Exchange on Thursdays 3:30-6:30 PM *181 Devonshire St, Boston, MA, 02110. **Boxed share, \$30 boxing fee applies.***

_____ BRIGHTON at the PSF Community Center on Thursdays 3:30-7 PM *640 Washington St, Brighton, MA, 02135*

_____ CAMBRIDGE at East Cambridge Savings Bank on Wednesdays 4-7 PM *1310 Cambridge Street Cambridge, MA, 02139*

_____ CAMBRIDGE at Life Alive on Fridays 4-7 PM *765 Massachusetts Ave, Cambridge, MA, 02139.*

Boxed share, \$30 boxing fee applies. (ONLY SPRING SITE OPTION FOR EASTERN MA)

_____ JAMAICA PLAIN at the First Baptist Church on Thursdays 3:30-6:30 PM *633 Centre St, Jamaica Plain, MA, 02130*

_____ NEWTON at St. John's Episcopal Church on Thursdays 4:15-7 PM *297 Lowell Ave, Newton, MA, 02460*

_____ SOMERVILLE at the Growing Center on Wednesdays 3:30-6:30 PM *22 Vinal Ave, Somerville, MA, 02143*

_____ SOMERVILLE at Arts at the Armory on Thursdays 3:30-7 PM *191 Highland Ave #1A, Somerville, MA, 02143. **Boxed share, \$30 boxing fee applies.***

_____ WATERTOWN at the Mt. Auburn Club on Thursdays 3:30-6:30 PM *57 Coolidge Ave, Watertown, MA, 02472*

_____ WORCESTER First Unitarian Church on Wednesdays 3 -7 PM *90 Main St, Worcester, MA, 01608*

- It is my responsibility to pick up my share on my scheduled pick-up date, during the scheduled pick-up time.
- **If I cannot pick up my share, it is my responsibility to arrange for someone to pick it up for me.**

- If I do not pick up my share during my scheduled pick-up time, the share will be donated to a local food pantry and I will not get a refund.
- The types of produce in my share will change weekly. There is no guarantee on the exact amount of produce. Shares will vary in weight, size and type of produce.
- I cannot return my CSA share for a refund or exchange it for other produce.
- I can cancel my participation in the pilot at any time. If I no longer want to participate, I will ask *Red Fire Farm* staff or email DTA.CSA@state.ma.us for a cancellation form.
- I will complete and return the form to *Red Fire Farm* at least 10 days before I receive my next monthly SNAP benefit.
- If I do not return the completed form at least 10 days before that date, my CSA share payment may automatically be deducted from my next SNAP benefit. In that case, the cancellation will take effect the following month.
- I understand that *Red Fire Farm* and DTA will act on my request to cancel my payment as soon as possible.
- I understand that I will not receive a refund for CSA share payments that have already been deducted.
- I agree to participate in a brief survey about this SNAP CSA Pilot at the beginning and end of the CSA season.
- My copy of this agreement, and the notices I will receive each time a payment is deducted from my SNAP EBT account, will serve as receipt of payment.

_____ SNAP Customer Signature	_____ Date
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Return form to: *Alex Reid, Red Fire Farm*
 184 Meadow Road, Montague, MA 01351