



## RED FIRE FARM EASTERN AND CENTRAL MA – 2024 SNAP CSA Pilot Membership Agreement

Community Supported Agriculture (CSA) is an arrangement where customers receive fresh, nutritious vegetables while supporting their local farmers. DTA, Project Bread and Red Fire Farm are working together to offer SNAP customers an easier way to pay for a CSA share. By participating in a CSA, you will get fresh produce, support local farmers and save money!

### CSA Partner Contact Information

**Name:** Christa Pylant  
**Address:** Red Fire  
184 Meadow Road  
Montague, MA 01351

**Phone:** 413-467-7645    **Website:** [www.redfirefarm.com](http://www.redfirefarm.com)    **Email:** [csa@redfirefarm.com](mailto:csa@redfirefarm.com)

### SNAP Customer Contact Information (Head of Household or Authorized Rep. only- Please print)

**Name:**

Last digit of SNAP Customer’s SSN# (Requested to determine benefit issuance date) OR the last digit of their temporary identification number/999 (Only if SNAP customer does not have an SSN#):

**EBT Card Number:**

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**Phone (include area code):**

**Email:**

### **I. Monthly cost of a SNAP CSA Share**

I am interested in buying a CSA share from *Red Fire Farm*.

\_\_\_\_\_ I agree to pay **\$ 133.00 per month** in SNAP benefits from my January 2024 or \_\_\_\_\_ (starting month) issuance through my March 2024 issuance for a *Deep Winter Farm Share* (average of 10-12 items of produce per week).

\_\_\_\_\_ I agree to pay **\$ 25.33 per month** in SNAP benefits from my January 2024 or \_\_\_\_\_ (starting month) issuance through my March 2024 issuance for a *Deep Winter Mushroom 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 bi-weekly January through March  
**Please check one of the following Deep Winter pick up Locations. Locations subject to change:**

- \_\_\_\_ CAMBRIDGE at Cambridge Daily Table on Fridays from 4-7PM *684 Massachusetts Ave, Cambridge, MA 02139*
- \_\_\_\_ JAMAICA PLAIN at the First Baptist Church on Fridays 3:30-6:30 PM *633 Centre St, Jamaica Plain, MA, 02130*
- \_\_\_\_ SOMERVILLE at Arts at the Armory on Fridays 3:30-6:30PM *191 Highland Ave #1A, Somerville, MA, 02143.*
- \_\_\_\_ WORCESTER First Unitarian Church on Fridays 3-6PM *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](mailto: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

**Return form to:** *Red Fire Farm*  
*184 Meadow Road Montague, MA 01351*