

Native Offerings Farm

8501 Maples Rd. Little Valley, NY 14755 csa@nativeofferings.com www.nativeofferings.com

2018-2019 Amherst and Orchard Park Shareholder Winter Registration Form

(Please note: Buffalo and the farm are our only points of distribution for our winter share)

Name: _____
 Address: _____
 Phone: _____ Email: _____

I'm splitting a share with:
 Name: _____
 Address: _____
 Phone: _____ Email: _____

I will pick up at the following distribution site:

- ___ Native Offerings Farm (8501 Maples Rd.) in Otto on Wednesday from 3:00-- 7:00 p.m.
- ___ First Presbyterian Church of Buffalo (1 Symphony Circle) on Thursday from 4:00-- 7:00 p.m.

I would like to purchase the following:

Share Options	Price	Installment Price	# of shares	Total Amount
Winter Share	FULL 420	430		
(Jan.-March)	SMALL 280	290		
	INDIVIDUAL 170	180		
GRAND TOTAL				
If paying in installments, please include two checks together: one check dated today for half the total installment price, one check post dated 10/1/18 for the other half				
<i>I'm making a non-tax-deductible gift to Native Offerings Farm for USDA organic certification</i>				
Payment enclosed with registration form				
<i>Please make checks payable to Native Offerings Farm</i>				

I am making a commitment to support Native Offerings Farm for the 2018-2019 season. I understand:

There is no guarantee on the exact amount or types of produce or fruit that I will receive for my share. Weather, insects and animals, etc. may affect the availability and quantities of produce. I will share both the rewards and the risks of the growing season with the grower and the other shareholders.

It is my responsibility to pick up my share within the scheduled time and place. If my share isn't picked up and I haven't made other arrangements ahead of time, my share will be considered forfeited and non-refundable, and will be donated.

I understand that my share contains unwashed produce and that I should clean it before eating.

I have made a copy of this form for my records, and am sending the signed original plus a payment check to NOF.

Signed: _____ Date: _____