

Signature:\_\_

## Mail to: Bialas Farms CSA 74 Celery Avenue New Hampton, NY 10958

845-374-4925 or 845-374-6941 www.bialasfarms.com / farmer@bialasfarms.com

\_ Date of Purchase\_\_\_

	CSA Contract – Please Print Clearly	Make a Copy for Your Records
Name:		
Email(s):		
Phone Number:		
Distribution Location:  Mid-Hudson Forensic Psychiatric Center 2834 Rt 17M New Hampton, NY 10958  Delivered to You on Thursday Afternoons June 20 - October 17		Choose a share option:  Large Share (feeds 4-5) \$700 Small Share (feeds 2-3) \$480  Note: There is NO CSA DISTRIBUTION on Thursday, July 4th.
Total Payment Due Payment Enclosed Balance Due	•	Cash Check # To pay via credit card, please visit BialasFarms.com. All electronic purchases will include a convenience fee. No paper application is required.
* I will receive an as * I understand that that vary by season * I understand I am * It is my responsibility without notice and	n. committing to participate for the full lity to arrange pick up of my share fo	roduce at each distribution. eceived depends on growing and storage conditions season membership and there are no refunds. r the duration of the CSA season. If I miss a pick-up up my share, my share will be donated.