

CONNORS FARM

2009 CSA SIGN UP FORM

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: () _____ E-Mail: _____

Quantity of shares @ \$450.00/share: _____ Total Enclosed: _____

Preferred pick up time: (check one)

- Friday Afternoon – Noon to 6:00pm
 Saturday Morning – 9:00am to Noon

Return this completed form by mail with a check payable to Connors Farm to:

Connors Farm
30 Valley Road
Danvers MA 01923

Or by fax to:
(978) 774-6250

If you wish to pay by credit card, please contact us directly at 508-527-3645.