



Please complete both sides of this form and return it to the Blandford Nature Center Visitor Services Desk, or mail it to our address below:

1715 Hillburn Ave NW, Grand Rapids, MI 49504

CHOOSE YOUR SHARE	I QTY		TOTAL
Vegetable Shares	<u>uii</u>		TOTAL
Full Share Member		\$600	
Full Share Non-Member		\$630	
Half Share Member		\$360	
Half Share Non-Member		\$375	
Working Vegetable Share Discount			
Working 30 hrs (2/week)			
Working 60 hrs (4/week)			
Flower Share			
Member/Non-member Share		\$150	
Herb Share			
Member/Non-member Share		\$100	
CHOOSE YOUR PICK UP LOCATION			
Blandford Nature Center Farm (Tuesdays 4-6:30pm)		FREE	
Fulton Street Farmers Market (Fridays 8am-1pm)		\$25/\$10*	
Fulton Street Farmers Market (Saturdays 8am-1pm)		\$25/\$10*	
*\$25 for Vegetable Shares, \$10 for Herb or Flower Shares.	GR	AND TOTAL: _	

OUR COMMITMENT

Blandford Nature Center's Farm will continue to do its best to provide an adequate amount of quality produce to its CSA members throughout the season. We are Certified Naturally Grown (CNG), a part of Slow Food of West Michigan (SFWM), Cropping System Certified through the Michigan Agriculture Environmental Assurance Program (MAEAP), and use organic principles in all of our growing practices to ensure healthy produce.

YOUR COMMITMENT

By signing up for a Blandford Farm CSA annual membership, I understand that I am joining a community that supports the Blandford Nature Center Farm. I understand that farming is never a guaranteed operation. Weather and other situations outside of our control can have an adverse effect on a given season, resulting in unpredictable outcomes. I also agree to pay my full share amount in the time allotted and authorize Blandford Nature Center to charge the indicated amount below to my Credit card.

PURCHASER INFORMATION

Name		Address:	
City:	State:	Z	(IP:
Phone:	Email	:	
If applicable, please add the name &	email addre	ess of the person you	wish to split your share with:
Name:	Er	nail:	
PAYMENT INFORMATION			
Check enclosed (made payable	e to Blandfo	ord Nature Center)	
Credit Card (card info below)	Visa	Master Card	AmEx Discover
**Please note that if you are mailing your for include card details below. You can pay in-pe	m in and wou erson at Bland	ld like to pay with a cred Iford Nature Center or ov	lit card, you do not need to er the phone at (616) 735-6240.
Cardholder Name			
Card #:		CV	/V:
Exp. Date:	Signature:	·	
Billing address the same as above	? If differen	t, fill out below:	
Billing Address:			
Billing City/State/ZIP:			

NEED MORE TIME TO PAY?

A \$100 deposit is required at registration to reserve a Vegetable Share or a Flower Share. Herb shares must be paid in full at the time of registration. The full balance is due by the first pick up day of your share.

BLANDFORD USE ONLY	Notes:
Date of Payment:	
Total Paid:	