



Name: _____
 E-Mail Address: _____
 Address: _____
 Phone Number: _____
 Date Completed: _____

QUESTIONS?

E-Mail
 CSA@GregsUpick.com

SUMMER CSA SHARE

*This is an 18 Week CSA Program running June 25th – October 22nd. Members can opt to be a part of the weekly or bi-weekly pick up's.
 To purchase a fruit share you MUST purchase a summer vegetable share.*

WEEKLY OR BI-WEEKLY PICK UP DAY:

(Tuesday 1:00 P.M. – 6:00 P.M.) (Wednesday 10:00 A.M. – 2:00 P.M.) (Thursday 1:00 P.M. – 6:00 P.M.)

ALL SHARES MUST BE PAID IN FULL BY 5/1/2024 OR AT TIME OF ENROLLMENT BEYOND 5/1/2024

PLEASE CHECK YOUR SHARE PURCHASE AND CIRCLE A PLAN FOR PAYMENT

- | | |
|----------------------------------------------------|-----------------------|
| _____ Farm Share - \$600 (Full Payment) | (20% Deposit = \$120) |
| _____ Two Farm Shares - \$1100 (Full Payment) | (20% Deposit = \$220) |
| _____ *ADD* Fruit Share - \$300 (Full Payment) | (20% Deposit = \$60) |
| _____ Bi-Weekly Farm Share - \$375 (Full Payment) | (20 % Deposit = \$75) |
| _____ Bi-Weekly Fruit Share - \$200 (Full Payment) | (20% Deposit = \$40) |

_____ Total Cost 2024 CSA Summer Shares	_____ Total Owed After Initial Payment
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SPRING / FALL CSA SHARES

Extend your CSA Season and begin five weeks earlier or five weeks later in the year with our Spring Share Program or Fall Share Program!

SPRING SHARE / FALL SHARE PICK UP DAY:

(Tuesday 1:00 P.M. – 6:00 P.M.) (Thursday 1:00 P.M. – 6:00 P.M.)

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|-------------------------------------------|--------------------------------------------------------------------------------------------------------------------|
| _____ Spring Share - \$245 (Full Payment) | (20% Deposit = \$49) |
| | <i>The Spring Share will run May 7th – June 18th. NEW seven week program!</i> |
| _____ Fall Share - \$175 (Full Payment) | (20% Deposit = \$35) |
| | <i>The Fall Share will run November 5th – December 10th, Breaking for Thanksgiving week.</i> |

_____ Total Cost 2024 CSA Spring / Fall Shares	_____ Total Owed After Initial Payment
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PAYMENT DETAILS

Cash Payment \$ _____ Check Number # _____ Pay Online: _____

Make Payable to Greg's U-Pick Mail to: Greg's U-Pick 9270 Lapp Rd Clarence Center, NY 14032

*I understand the Greg's U-Pick CSA Program and acknowledge that this payment is non-refundable. I acknowledge that Greg's U-Pick reserves the rights to this membership and that customers will adhere to their scheduled pick up day. I acknowledge that any substitutions made are at Greg's U-Pick's discretion.