



**Dragonfly Farms CSA
2010 Membership Application
Summer/Fall Whole Foods Markets**

Please complete and send this form and payment to: Dragonfly Farms P.O.Box 10 Mount Airy, MD 21771

_____ name

Summer Share \$395 (9 weeks)

_____ address

Fall Share \$495 (12 weeks)

_____ city

Summer/Fall Share \$890

Crate fee \$25 (Not an option; please include.)

_____ state/zipcode

Total enclosed: _____ check #: _____

_____ phone # to send a text, if needed

Please enclose the refundable crate fee;
your share will be confirmed once payment is received.

_____ email address

By signing this application, I accept that crop availability is weather dependent, fruit and vegetables are available on a seasonal basis, and the amount and quantity I receive each week is subject to harvest and growing conditions. I also agree that the weight and volume of my weekly share will vary throughout the season-spring, summer, and fall.

I acknowledge that as a shareholder I am taking part of the risk of the farming business operation of Dragonfly Farms.

I agree that Whole Foods Market is not liable for the delivery of my shares.

Signature _____ Date: _____

Questions? Call 240-353-8408 or email dragonflyfarms@hotmail.com
or use our contact us form on our website: dffarms.com

"you are what you eat"

Payment submitted _____ date _____ ck# _____ Whole Foods Vienna