



MYCOTERRA AUTO-SNAP

CSA Pilot Membership Agreement

CSA Membership Agreement 2021

Community Supported Agriculture (CSA) programs provide SNAP customers with fresh, nutritious fruits and vegetables while supporting local farmers. DTA, Project Bread and Mycoterra Farm work together to offer SNAP customers an easy way to pay for these fruits and vegetables, which are called Farm Shares. Participating in a Farm Share allows SNAP customers to get fresh produce, support local farmers and save money!

CSA Partner Contact Information

Name: Julia Coffey
 Address: 75 Stillwater Rd
 South Deerfield MA 01373

Email: Sales@massfooddelivery.com

Phone: 413-397-3654

SNAP Customer Contact Information (Head of Household or Authorized Rep. only- Please print)

Name:

Last digit of SNAP Customer’s SSN# or the last digit of client’s temporary 999 identification number. (Note: The 999 number is assigned by DTA and only acceptable if the client does not have a valid SSN.):

EBT Card Number:

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Phone (include area code):

Email:

I. Monthly cost of an Auto-SNAP CSA Farm Share

I am interested in buying an Auto-SNAP CSA Farm Share from *Mycoterra Farm*.

Please check one of the following ways to pay for the SNAP CSA Farm share:

_____ I agree to pay **\$40.00** per month in SNAP benefits from my _____ (Starting Month) benefits issuance through my _____ (End Month) 2021 issuance for a **Mixed Produce Share** (20 pounds, 7-9 items/box).

_____ I agree to pay **\$40.00** per month in SNAP benefits from my _____ (Starting Month) benefits issuance through my _____ (End Month) 2021 issuance for a **Mixed Mushroom Share** (4 pounds, 3-4 types of mushrooms per box).

_____ I agree to pay **\$40.00** per month in SNAP benefits from my _____ (Starting Month) benefits issuance through my _____ (End Month) 2021 issuance for a **Mixed Apple Share** (20 pounds, 2-4 types apples per box).

_____ I agree to pay **\$40.00** per month in SNAP benefits from my _____ (Starting Month) benefits issuance through my _____ (End Month) 2021 for a **Free Choice Share** select from seasonal produce 4-10 items, 10-20 pounds).

_____ I agree to pay **\$60.00** per month in SNAP benefits from my _____ (Starting Month) benefits issuance through my _____ (End Month) 2021 for a **Free Choice Share** (select from seasonal produce, 6-15 items, 15-30 pounds).

_____ I agree to pay **\$80.00** per month in SNAP benefits from my _____ (Starting Month) benefits issuance through my _____ (End Month) 2021 for a **Free Choice Share** (select from seasonal produce, 8-20 items, 20-40 pounds).

OR

Partial Payment with SNAP Benefits:

I agree to pay \$_____ in SNAP benefits per month from my _____ (Start Month)benefit issuance through my December 2021 issuance as a partial payment towards the total monthly cost of my \$40/month CSA Farm Share. I will pay the remaining balance \$_____ to Mycoterra Farm with an alternative form of payment.

If I cannot pay the full balance of my CSA Farm Share, Mycoterra Farm will change the amount of produce in my share, equal to the amount of what was deducted from my SNAP benefit.

II. I understand that:

- The amount I agreed to above will be automatically deducted from my EBT account on the date that I receive my SNAP benefits.

- I will receive farm produce monthly through Home Delivery or Pickup at 75 Stillwater Rd, South Deerfield MA 01373. Delivery days are Wednesday through Friday. Delivery day depends on delivery location.
- **If I cannot pick up my share, it is my responsibility to have someone to pick it up for me.**
- If I do not pick up my share during the scheduled pick-up time, it will be donated to a local food pantry, shelter or other institution that will make use of the produce and **I will not get a refund.**
- The types of produce in my share will change weekly. There is no guarantee on the exact amount of produce. Shares will vary in weight, size and type of produce.
- I cannot return my CSA Farm Share for a refund or exchange it for other produce.
- I can cancel my participation in the pilot at any time. If I no longer want to participate, I will ask Mycoterra staff or call the DTA at 413-772-3411 for a cancellation form.
- I will complete a cancellation form and return the form to Mycoterra at least 10 days before I receive my next monthly SNAP benefit should I choose to cancel.
- If I do not return the completed cancellation form at least 10 days before that date, my CSA Farm Share payment may automatically be deducted from my next SNAP benefit. In that case, the cancellation will take effect the following month.
- I understand that Mycoterra and DTA will act on my request to cancel my payment as soon as possible.
- I understand that I will not receive a refund for CSA Farm Share payments that have already been deducted.
- I agree to participate in a brief survey about this SNAP CSA Pilot at the beginning and end of the Farm Share season.
- My copy of this agreement, and the notices I will receive each time a payment is deducted from my SNAP EBT account, will serve as receipt of payment.

SNAP Client Signature

Date

Return form to: Julia Coffey
75 Stillwater Rd
South Deerfield MA 01373