

Red Hill Farm 2025 CSA Membership Application

| Name | | | |
|----------------------|---|---|------------------------------|
| Street Address | | | |
| City | | State | Zip code |
| Phone number | | | |
| Email address | | | |
| the first week of Ju | une through the middle of No lay between 1:00 P.M. and 6 | ganically grown produce. The ovember. Members may pick i:30 P.M. | · · · · · |
| | Tuesday | | |
| | , | yment Options | _ |
| Francis" with "Red | ed with this membership app Hill Farm" listed in the mem | olication. Please make checks no line. Failure to make paymened. No refunds will be offere | ents on time will result in |
| | Payment in F | ull (\$850.00) | |
| | Two Payment | rs (\$425.00) | |
| | 2 nd payment o | f \$425.00 is due at first share | pick-up. |
| providing high qua | nlity organic produce and I ur | 25 season. I understand the fonderstand that some growing ed in this membership applica | conditions may be out of the |
| Date | Signed | | |
| | Mail complet | ed form and payment to: | |

Red Hill Farm, 609 S. Convent Road, Aston, PA 19014

Please feel free to contact us with questions at (610) 558-6799 or redhillfarm@osfphila.org.