

| Name:   |                                 | ſ       |                      |
|---|---------------------------------|---------|----------------------|
|   |                                 |         | QUESTIONS?           |
| E-Mail Address:   |                                 |         | E-Mail               |
| Address:  |                                 |         | CSA@Gregsupick.com   |
| Phone Number:   |                                 |         |                      |
| Date Completed:   |                                 |         |                      |
| SUMMER CSA FLOWER SHARE   |                                 |         |                      |
| This is a 10 Week CSA Program running July 23 <sup>rd</sup> – September 26th. The share includes a weekly bucket of flowers, the bucket will be provided at the beginning of the season. Members will enter the field and cut their own flowers during vegetable share pick up times. A special tulip pick and sunflower pick will be offered if the crop allows. |                                 |         |                      |
| WEEKLY OR BI-WEEKLY PICK UP DAY:  |                                 |         |                      |
| (Tuesday 1:00 P.M. – 6:00 P.M.) (Wednesda   | y 10:00 A.M. – 2:00 P.M.) (Thur | sday 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  |                                 |         |                      |
| U-Pick Flower Share \$200   |                                 |         |                      |
| Total Cost 2024 CSA Flower Summer Shares  |                                 |         |                      |
| DA  | YMENT DETAILS                   |         |                      |
|   |                                 |         | D 0 1/               |
| Cash Payment \$ Ch  | eck Number #                    |         | Pay Online:          |
| Make Payable to Greg's U-Pick Mail to: Greg's U-Pick 9270 Lapp Rd Clarence Center, NY   |                                 |         |                      |

14032

<sup>\*</sup>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.