



JUST ROOTS 2024 WINTER SHARE AUTO-SNAP CSA Pilot Membership Agreement

Community Supported Agriculture (CSA) programs provide SNAP customers with fresh, nutritious fruits and vegetables while supporting local farmers. DTA, Project Bread and Just Roots 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: Emily Chiara
 Address: 34 Glenbrook Drive
 Apt. 1B,
 Greenfield, MA 01301
 Email: emily@justroots.org Phone: 413-325-8969

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 *Just Roots*.
 Please check one of the following ways to pay for the SNAP CSA Farm share:

- A. **_____ PAY FULLY WITH SNAP:** I agree to pay **\$50** per month in SNAP benefits from my January 2024 benefits issuance through my March 2024 issuance. I will receive a monthly CSA farm share (10-15 items per box) from January - May.
- B. **_____ PAY PARTIAL SNAP:** I agree to pay \$_____ per month in SNAP benefits from my January 2024 benefits issuance through my March 2024 issuance. I will pay the remaining \$_____ in cash/credit/check. I will receive a monthly CSA farm share (10-15 items per box) from January - May.

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.
- Payments will be automatically deducted for my winter produce share ONLY. Payments for a winter meat CSA will require monthly manual EBT swipes at pickups/upon delivery.
- 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 pick up farm produce on Thursday from 1-6PM (Jan 25, Feb 22, Mar 28, Apr 25, May 30) OR Friday 8-11AM (Jan 26, Feb 23, Mar 29, Apr 26, and May 31) which will be available at 34 Glenbrook Drive, Greenfield, or if I qualified for and requested delivery, I will receive it by delivery to the address I provide to Just Roots.
- It is my responsibility to pick up or receive my share on my scheduled pickup or delivery date, during the scheduled time.
- If I cannot pick up my share, I will send someone else to pick it up, or know that it will be donated. If I enrolled in delivery and cannot be home to receive my share, Just Roots will leave it for me as directed to the best of their ability.
- The types of produce in my share will change. 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 *Just Roots* staff or email DTA.CSA@MassMail.State.MA.US for a cancellation form.
- I will complete and return the form to *Just Roots* at least 10 days before I receive my next monthly SNAP benefit.
- If I do not return the completed 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 *Just Roots* 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 Emily Chiara: *Just Roots, 34 Glenbrook Drive, Apt. 1B, Greenfield, MA 01301*