



MACSAC

Partner Shares

Madison Area Community Supported Agriculture Coalition

PO Box 7814, Madison, WI 53707-7814

Phone: 608-226-0300 Fax: 608.267.7314

e-mail: info@macsac.org web: www.macsac.org

*When MACSAC receives your enrollment information we will pay the farm directly for the entire cost of your share. **You are responsible for repaying MACSAC 50% of the share cost based on the payment schedule you create below.** Please complete and return to Partner Shares.*

Post-dated checks are the preferred method of payment. MACSAC will deposit them as posted. If possible please include post dated checks with these forms. Please call the MACSAC/Partner Shares office immediately at (608) 226-0300 if you are having trouble making a payment, so that we can work with you to create a more comfortable plan.

Partner Shares Program Payment Plan

Name: _____

Email: _____

Date: _____

Phone: _____

Address: _____

Household size: _____

Farm of choice: _____

Please send me a copy of the 'Asparagus to Zucchini' cookbook for \$5.00!

Please include your farm membership form with this application!

Farm Choice: _____

Share type (describe): _____

Total cost of share(s): _____ divided by 2 = _____ Total amount owed to Partner Shares

Please list your exact payment due dates & amounts:

Due Date	Amount Owed to Partner Shares
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
*Total:	

