

Conscience Point Shellfish

2019 CSA – Registration Form



Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Phone: _____

Billing Address: _____ { } Same as above

City: _____ State: _____ Zip: _____

Oysters:

New for 2019 same delicious oysters, one amazing level!

\$300 ~ 300 oysters! You chose how many and which weekends.

NEW: Got hungry? Had a party? Interested in more?

Add oysters for \$1 each after you've finished your 300!

Referral:

{ } Returning Member { } Other: _____

{ } Friend: _____

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Payment Method:

Cash Check

Credit Card: _____

Exp: _____ CVC: _____ Billing Zip: _____

Pay Today Pay on May 24th, 2019

I allow CPS to charge my credit card on the date selected above.

Sign: _____ Date: _____

Checks Mailed to: Conscience Point Shellfish

Attn.: CSA

PO Box 940

Southampton, NY 11969

Pickup:

I understand all orders must be placed by Wednesday of each week.

I understand that I must pick up my CSA every Saturday from May 25th, 2018 to November 2nd, 2019. Pickup is by appointment from 9 A.M. to 12 P.M..

Sign: _____ Date: _____