



2010 Shallowbrook Farm Fresh Cooperative
Membership Application

Name: _____

Address: _____

City, State Zip: _____

Phone Number: _____ Home

_____ Work

E-mail: _____

Number of people in household: _____

Pick -up Location _____ (home delivery add \$50)

Circle one: Full Share Half Share

Payment method Check # _____

Signature _____