

## **Institutional Weekly Basket Application 2016**

Questions? Please call: 212-561-7327.

Please fill out the below form and return to hattiecarthancommunitymarket@yahoo.com or Yonnette Fleming; 619 Willoughby Avenue Floor 2; Brooklyn, NY 11238

Contact Information:						
Name of Business/Organization						
		Telephone				
		Email				
City/State/Zip.						
Only/Oldio/2.ip.						
How did you learn about the Hattie Carthan Institutional Mixed Basket Program?  Announcement at a meeting/event Friend  Flyer or brochure Email announcement  Newspaper article Other:  www.hattiecarthancommunitymarket.com						
Variety	# Bunches	Variety	# Bunches			
Basil		Thyme				
Cilantro		Sage				
Rosemary		Pineapple Sage				
Lemon balm		Epazote				
Lavender		Mint				
☐ Large Institution weekly☐ Institution Combination P	earliest time for et will have the Basket (2 doz. Basket (3 doz.	eggs, 2 doz. bunches of herbs) eggs, 3 doz. bunches of herbs	ts not etion of the \$100 /mo )\$175/mo			

## **Basket Options**

Herbs

Please indicate below what quantity of which herbs you would like to receive in your weekly basket. Changes to your herb order can be accommodated during the course of the season if requests are submitted a full week in advance of the requested order change. Please only indicate a total number of bunches equal to the number provided at the basket level you have selected above.

Fruits and Vegetables (complete this section only for Combination Produce Basket orders)

The fruits and vegetables provided in the Combination Produce Basket will be selected at the discretion of the market staff and will represent the seasonal availability of our region. The list below includes the vegetables that you may possibly receive in your basket over the course of the season. If there are any items you *would not* like to receive as part of your basket please strike through the listing below and we guarantee that the indicated items will not be included in your basket.

Vegetables
Carrots Sweet Potatoes Potatoes Beets Turnips Summer Squash varieties Winter Squash varieties

Member Commitment
I,, on behalf of (business or institution name)
commit to membership in the Hattie Carthan
Community Farmers' Market Institutional Basket Program for the 2016 season. As a
member, I commit to making my monthly payments for the Basket I have requested for
all 5 months (at least 16 out of the 20 weeks) of the farmers' market season, July –
November. If I am unable to receive my basket, I will contact market staff in advance or
my basket will be donated. In addition, I commit myself to pick up my weekly Basket at
the Hattie Carthan Community Farmers' Market each Saturday after 8:30a.m. and before
the close of market at 3p.m. I understand that if I do not pick up my basket it will be
donated at the discretion of market staff. I understand baskets will vary in weight
depending on the time of the season and the contents of the basket. I attest I have read
and understand to the best of my abilities.
Member Signature: Date:

Hattie (	Carthan	Staff Signature:	 Date:	