

2025 Partner Shares Program Application

FairShare CSA Coalition | 211 S. Paterson St. Ste. 280, Madison, WI 53703
 (608) 285-2434 | partnershares@csacoalition.org | www.csacoalition.org



| | | | | | | |
|--|--|--|---|--|-------|----------|
| First Name | | Last Name | | Primary Phone Number | | |
| Street Address | | City | County | | State | Zip Code |
| Email | | | Best way(s) to contact you: <input type="checkbox"/> Email <input type="checkbox"/> Phone <input type="checkbox"/> Text | | | |
| How did you hear about Partner Shares? <input type="checkbox"/> Friend <input type="checkbox"/> CSA Farm <input type="checkbox"/> Newspaper <input type="checkbox"/> Internet <input type="checkbox"/> Event <input type="checkbox"/> Other: | | | | | | |
| Are you a 1st time CSA member? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | Are you a 1st time Partner Shares applicant? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| Did you receive Partner Shares funding in 2021-2024? (Select all that apply) - This won't impact 2025 assistance. <input type="checkbox"/> 2024 <input type="checkbox"/> 2023 <input type="checkbox"/> 2022 <input type="checkbox"/> 2021 | | | | | | |
| Do you currently receive SNAP benefits? (Answer won't affect your application) <input type="checkbox"/> Yes <input type="checkbox"/> No | | | What amount (\$) are you willing/able to spend on fresh fruits & vegetables per week for your household? | | | |
| How often do you eat fruits and vegetables? <input type="checkbox"/> I/we eat fruits and/or vegetables at every meal <input type="checkbox"/> I/we eat fruits and/or vegetables at least once per day <input type="checkbox"/> I/we eat fruits and/or vegetables at least 5 times/week <input type="checkbox"/> I/we eat fruits and/or vegetables at least 3 times/week <input type="checkbox"/> Other: | | Describe your current household eating habits: <input type="checkbox"/> I/we eat out for most meals <input type="checkbox"/> I/we eat mostly pre-prepared/packaged foods <input type="checkbox"/> I/we eat mostly meals prepared at home <input type="checkbox"/> Other: | | <input type="checkbox"/> Less than \$10 <input type="checkbox"/> \$10-15 <input type="checkbox"/> \$16-20 <input type="checkbox"/> \$21-25 <input type="checkbox"/> \$26-30 <input type="checkbox"/> More than \$30 | | |

SECTION 2: ELIGIBILITY

Eligibility is partially based on your household income. Please answer the following questions to confirm that your household is eligible for Partner Shares. If eligible, assistance will be provided on a first-come, first-served basis, up to a maximum amount of \$350.

How many members are in your household? _____ What is your annual household income? _____

I do not meet the Partner Shares eligibility guidelines. However, I still require/request assistance.

Choose your requested assistance level:

25% 50% 75% No Assistance (but I want FairShare to process my SNAP benefits)

Please provide any feedback you may have on the sliding scale assistance aspect of the program:

SECTION 3: FARM CHOICE

Once you sign up with the CSA farm, please send us confirmation from the farm (a receipt, copy of an email, etc.) to partnershares@csacoalition.org.

CSA Farm Name _____

CSA Share Type* _____ (Ex: Full, Half, Standard, Every Other Week)

Share Cost _____

*Only on-farm produced shares are eligible for Partner Share Program funding

Partner Shares income guidelines, based on 200% of the Federal Poverty Level

| Household Size | 200% | |
|----------------|----------|-----------|
| | Monthly | Annual |
| 1 | \$2,510 | \$30,120 |
| 2 | \$3,407 | \$40,880 |
| 3 | \$4,303 | \$51,640 |
| 4 | \$5,200 | \$62,400 |
| 5 | \$6,097 | \$73,160 |
| 6 | \$6,993 | \$83,920 |
| 7 | \$7,890 | \$94,680 |
| 8 | \$8,787 | \$105,440 |
| 9 | \$9,683 | \$116,200 |
| 10 | \$10,580 | \$126,960 |

SECTION 4: Payment Plan

Please select your preferred method of payment for your CSA share. **Once your application has been approved, FairShare staff will send you a payment plan.**

- Single Check:** 1 Payment, processed immediately
- Multiple Checks:** 6 Payments, split May-Oct
- SNAP/EBT:** Payments split over duration of CSA Share
- Credit Card:** 1 Payment, processed immediately
- Credit Card:** 6 payments, invoiced monthly starting immediately
- Multiple Methods** (i.e. check + SNAP)

SPECIAL OFFER: FairShare Cookbook for \$5

*From Asparagus to Zucchini and Farm-Fresh and Fast are extremely helpful cookbooks for learning how to store and use the vegetables from your CSA share. Partner Shares members can purchase one discounted cookbook! **Partner Shares Staff will contact Partner Shares participants in March with purchase information.***

SECTION 5: Optional Demographics

In order to improve our outreach efforts and communicate with potential donors and funding sources about Partner Shares, we would like to learn a little more about our applicants. Providing demographic information is optional and appreciated! (Answers provided to the following questions do not affect the level of assistance approved/received)

| | | |
|---|---|--|
| What is your age? _____ | How many people in your household are under the age of 18? _____ | How many people in your household (including yourself) are 65 or older? _____ |
| Please indicate your gender identification: _____ | With what ethnic group do you most identify? _____ | With what racial group do you most identify? _____ |
| What is the highest degree or level of education you completed? _____ | | |

SECTION 6: Participant Agreement

As a Partner Shares participant, I certify that:

- My household qualifies for Partner Shares assistance based on FairShare's eligibility guidelines.
- I agree to pay FairShare CSA Coalition the CSA share co-payment amount determined by my income level.
- I will inform the Coalition immediately if I am having trouble making a payment, changing banking accounts or EBT card numbers, or must cancel my farm membership.
- I understand that I am making a commitment to a farm, and will be responsible for picking up my vegetable share every week throughout the season.
- I agree to engage in all program communications and interactions with respect, courtesy, and constructive intent, refraining from discriminatory, or hostile language or behavior.

Please note: Failure to abide by the Participant Agreement may impact future program eligibility.

The following are not required to participate. Please check to opt-in:

- I grant FairShare CSA Coalition the permission to publish photographs of me and my family at CSA Coalition events for media and promotional purposes.
- I would like to receive FairShare's email Newsletter.

Signature

Date

Application Requirements

The availability of shares and funding are limited. Requests for Partner Shares assistance are granted on a first-come, first-served basis. If you have questions call (608) 285-2434. Checks should be made out to "FairShare CSA Coalition" **You will NOT be registered with your farm until the Coalition receives your application & payment(s).**

You must send in ALL of the following completed forms for your application to be considered complete and be processed:

- Partner Shares Application**
- CSA Farm Sign-up Form**

Send completed forms and deposit to: **FairShare CSA Coalition, c/o Partner Shares, 211 S. Paterson St. #280, Madison WI 53703**