Kennesaw State University (KSU)
Community Supported Agriculture (CSA) Terms and Conditions

Dates, Hours and Location of Operation
The summer CSA season will run for eight weeks starting May 30 through July 25. Pick up is inside The Commons entrance Wednesdays from 10 a.m. to 2 pm.

Fees:
8-week CSA membership: $160 ($20/wk) + sales tax (2%)

Member Release Form: Acknowledgment of Risks and Hazards Liability Release (or) Release, Waiver of Liability, Assumption of Risk & Covenant Not To Sue:

- I understand that my payment entitles me to a weekly share of fresh, Georgia grown produce.
- I also understand that I am making a commitment to KSU’s CSA membership program, and recognize that the exact amount of produce I will receive for my share is not guaranteed and that I will share both the rewards and the risks of the growing season along with the other members and farmers.
- I understand that my payment is to be made in full at the time of purchase or via direct deposit and is non-refundable. I understand that payroll deductions will occur June and July for the summer CSA season. For monthly employees, each deduction will be $80, and for bi-weekly employees, each deduction will be $40. I hereby release, indemnify and hold harmless Kennesaw State University and Forerunner Foods from any responsibility or liability for injuries or damage of any kind which I, or anyone accompanying me, may incur as a result of being at the KSU Farmers Market or using any produce or other farm product.
- I understand that all food produced on the farm may have inherent risks and dangers as well as risks that may be individual in nature, and may put members in my household and me at risk of serious foodborne illness, disease, infirmity or even death. I agree to release, forever discharge, indemnify, defend and hold harmless KSU, Forerunner Foods, and its owners, officers, agents, and employees from all liability for negligence and any and all losses, damages, costs and attorney’s fees resulting from any and all claims or suits for personal injuries, death and/or property damage of any kind while on the farm or after leaving the premises. I have read and understand the above paragraphs. I voluntarily enter into this agreement on behalf of myself and my family.
- It is my responsibility to pick up my share within the scheduled distribution hours on my designated pick-up day. If I am unable to pick up my share on my scheduled day, it is my responsibility to arrange for one of my listed friend or family member pick-up alternatives to pick it up for me. If I do not retrieve my share during the scheduled pick-up time, my share will be donated to the KSU Care Center, a local food pantry or family in need.
- KSU Farmers Market and Forerunner Foods take the safety of your food seriously. For your added protection, please wash all produce before eating.
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Name: _______________________________________

Phone Number: ________________________________

KSU Email Address: __________________________________

KSU ID: ________________________________

Method of Payment (check one):
□ Card □ KCash □ Dining Dollars □ Payroll Deduction

Alternate Designated Recipient (list up to two):

1. ________________________________
   Phone Number: ____________________________

2. ________________________________
   Phone Number: ____________________________

___________________________________________

I, ________________________________ agree to the KSU CSA Terms and Conditions.

Signature: ________________________________
Date: ________________________________