

2020 SENIOR FARMSHARE APPLICATION

Deadline: June 15st 2020

		Holyoke Council on Aging	
Senior Name		Distribution Site	
Address	City	State	Zip
Phone (day)	(eve)	Email	
To qualify for the program, y	ou must be <u>60 years of age</u>	or older	
You must also be able to che	ck at least ONE of these for	ır boxes:	
□ I participate in the Fo□ I live alone and my inc	ts (food stamps), Medicaid, od Bank's Brown Bag Progracome is below \$24,980; ny household is below \$33,8	m;	
I understand:			
	•		n, I will receive a weekly share of depending on the time of the
That there is no guara	intee on the exact amount or a variety of fresh farm prod		will receive in my share and that
	er. If I am unable to pick up		d to a low-income person or ended period of time, I will notify
Signature:			_ Date:

Please return this form to Tricia Zoly at the Holyoke Council on Aging, 291 Pine Street. Contact Tricia Zoly at (413) 322-5625 for more information.