

Wurth farms  
Harvest Partner  
APPLICATION  
2019

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Telephone Number(s) \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Please select basket: \_\_\_ Harvest Family \$375 \_\_\_ Harvest Junior \$265

PICK UP LOCATION: \_\_\_\_\_ OLIVET CH. RD. \_\_\_\_\_ SOUTHSIDE MKT.

# of Membership cards requested: 1 2

Name to appear on card(s): 1) \_\_\_\_\_

2) \_\_\_\_\_

Please enclose a check or money order payable to:

Wurth Farms

1720 South Friendship Rd.

Paducah, KY 42003

Please circle: will this Membership be a donation to PCM? Yes/No

If yes, do you wish to make the donation anonymously? Yes/No

Will this membership be a gift to someone? Yes/No

If yes, please provide the following:

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

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OFFICE USE: CHECK# \_\_\_\_\_ AMOUNT \$ \_\_\_\_\_ HP# \_\_\_\_\_