



Financial Application for the Reduced Rate Hemp Extract Program

Name

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Home Address

(City)	(State)	(Zip)

Mailing Address (if different)

Street		
(City)	(State)	(Zip)

Phone Number

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Times available to call:

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Emergency Contact:

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Employer Information

Employed:

FILL OUT BELOW IF YOU CIRCLED YES

Employer's Name:

Phone:

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Position:

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Income Section

Household Income: (monthly)

\$	\$	\$
(applicant)	(spouse)	(total)

Disability or SS Check:

If yes, how much? \$ _____

Other income? \$ _____

Reasons as to why you qualify:

Print Name:

Signature:

Date:

Help us help others!

Here at Rush Farms we offer the agriculture LETS (local exchange trading system)! This is NOT intended to trade items, but to trade your skills and time for a return in helping others.

List the skill(s) you would be able to offer/hourly rate

Please attach proof of income