

**FMAP Grower Agreement**  
**Farmers Market Agency Pickup (FMAP)**

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**GROWER Contact Information**

Name of grower or processor : \_\_\_\_\_

Grower Mailing address:

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

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**Terms of Reimbursement of Costs:** FMAP is a Farm to Foodshelf program. I understand that before any reimbursements for costs related to harvesting and packaging of donated produce the following conditions must be met:

- Produce must be donated to a participating Farm to Foodshelf foodshelf that is eligible to receive food from a Feeding America food bank serving Minnesota.
  - All invoices and donation receipts must be submitted via mail once reimbursement amount is equal or greater than \$100.00, or at the end of the season if amount is not reached.
  - All instructions on donation receipt must be followed in order to receive payment.
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**Food Safety Agreement:** I agree that all produce donated through Farm to Food Shelf complies with applicable regulations. All produce has received proper handling and is safe and unadulterated.

- I certify that the produce I am donating would otherwise go unharvested or go to waste, and is from Minnesota.
- I hereby authorize the six participating food banks, their partners and news media to record my name, likeness, image, voice, performance and information about my participation in Farm to Foodshelf on film, tape or otherwise ("Material"). I agree that the materials may be edited as desired and used in whole or in part in any form, format, manner or media, now known or hereafter devised, for any distribution purpose, throughout the world in perpetuity. I understand and agree that the Material may be used in the Project or in any other materials at the participating food banks' sole discretion. I understand that I have no rights to the Project, Materials and any other products or benefits derived therefrom.

Name (please print): \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

**Mail or Email Grower Agreement to:**

Second Harvest Heartland  
7101 Winnetka Ave N, Brooklyn Park, MN 55428  
Attn: Heidi Coe  
hcoe@2harvest.org  
651.282.0855

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