

Polaris Orchard Integrated Pest Management Form

Please Mail Check and Form To:

Subscription Price: \$60

Polaris Orchard Management
364 Wilson Hill Rd
Colrain, MA 01340

You're Name: _____

Email Address for Newsletters: _____

Farm Name: _____

Location: _____

We will create an account for you with a default password. Your account information will be emailed to you once complete. Thank you!

Thank you for supporting Polaris IPM
www.polarisipm.com