

Harvest Boxes Week of March 30th

Please submit your order by: **Monday, March 30th**

Pick up day is: **Thursday, April 2nd**

Orders can be made by calling 517-679-6309 or emailing nina@eatredhaven.com

_____ **Health Nut Produce Box** \$25

_____ **½ Gallon Whole Milk** \$4

_____ **Artisan Produce Box** \$28

_____ **½ Gallon Chocolate Milk** \$4

_____ **Meat Box** \$25

_____ **½ Gallon Lemonade** \$4

_____ **Dairy Box** \$20

_____ **2 x 8oz Filet Steaks** \$25

_____ **Red Wine & Cheese Box** \$35

_____ **6 oz Meat Sticks** \$8

_____ **White Wine & Cheese Box** \$35

_____ **Coffee Box - Sumatra** \$18

_____ **Coffee Box - Decaf** \$18

Contact & Payment Information

Please let us know the best way to contact you with additional questions. We will email you a receipt once your credit card has been charged.

Your Name _____

Telephone _____

E-Mail Address _____

Credit Card Number _____

Expiration Date _____ CVV _____ Billing Zip Code _____

Signature of Card Holder _____

Total Price _____

Family Meals Week of March 30th

* * At this time we are requesting 2-3 days notice to prepare.

Orders can be made by calling 517-679-6309 or emailing nina@eatredhaven.com

_____ **Keith's Picnic** \$35 (small)

_____ **Keith's Picnic** \$60 (large)

_____ **Roast Chicken Meal** \$75

_____ **Veggie Delight** \$30 (small)

_____ **Veggie Delight** \$50 (large)

_____ **Sunday Morning** \$32 (small)

_____ **Sunday Morning** \$64 (large)

Dessert Sampler Pack

_____ **pick 4** \$24

_____ **pick 6** \$32

_____ candy bar

_____ gluten free apple cake

_____ vegan cheesecake

Pick Up Day

_____ Thursday, April 2nd 11:30-8:00

_____ Friday, April 3rd 11:30-8:00

_____ Saturday, April 4th 5:00-8:00

Contact & Payment Information

Please let us know the best way to contact you with additional questions. We will email you a receipt once your credit card has been charged.

Your Name _____

Telephone _____

E-Mail Address _____

Credit Card Number _____

Expiration Date _____ CVV _____ Billing Zip Code _____

Signature of Card Holder _____

Total Price _____