



Co-op Member-Owner Equity Application

Individual membership Business membership

Member Name: _____ Share Amount \$ _____ (\$20 min)

Phone #: _____ Driver's License/ID#: _____ State issued: _____

Mailing Address: _____ City, State & Zip Code: _____
(USPS mailing address for Co-op related news and Patronage Dividends information—not sold or shared)

E-mail: _____ e-Receipt (Make sure to fill out your email)
(e-mail for e-Receipt, specials, news and info—not sold or shared)

Signature: _____ Date: _____

I hereby apply for member/ownership into Quincy Natural Foods Co-op, Inc. under the terms and conditions contained in the Articles of Incorporation, the By-Laws and amendments there to, and the regulations enacted by the Board of Directors. Membership at Quincy Natural Foods Co-op, Inc. is individual and non-transferrable.

For QNFC FRFC Use Only

Attach to a bar-coded membership application – Create membership –
Attach receipt to application form and give the new member their packet. Initials: _____ Date: _____



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