



## **Member-Owner Application Form**

Household member name: \_\_\_\_\_

Address: \_\_\_\_\_

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

Phone number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

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

### **Please select a member-owner equity share option:**

- Equity payment in full, \$200, processing fee waived
- Monthly installments, \$20 each for 10 months, \$10 processing fee\*
- Quarterly installments, \$20 each for 2 ½ years, \$10 processing fee\*

\*Processing fee due with first payment

Low income option available. For more details, please contact our membership committee at [membership@terrefoods.org](mailto:membership@terrefoods.org) or contact a representative at our booth at the Farmer's Market.

### **Payment by:**

- Cash (in person only)
- Check, payable to Terre Foods Cooperative Market
- Credit Card: visit [www.terrefoods.org](http://www.terrefoods.org) and click the membership tab for online application.

A copy of the by-laws of Terre Foods Cooperative Market may be found at [www.terrefoods.org](http://www.terrefoods.org). It is the member-owner's responsibility to provide Terre Foods with a current mailing address should the above information change.

As with any investment, your ownership share is subject to risk. If the Co-op is unsuccessful, the member-elected Board of Directors will determine distribution of remaining assets. Every effort will be made to refund the paid portion of your member-owner equity share.

### **Signature**

\_\_\_\_\_  
Date \_\_\_\_\_

- I am interested in volunteer opportunities
  - Please do not include my name on the Terre Foods website or any promotional materials
- Please send this application along with payment to: Terre Foods Cooperative Market,  
P.O. Box 3043, Terre Haute, IN 47803.