



NAME : (staff use only) \_\_\_\_\_ OWNER# \_\_\_\_\_

# NEW OWNERSHIP APPLICATION & AGREEMENT

Check box if you have previously been an Owner.

**For the purpose of using the services of the Co-op,** I hereby apply for ownership/membership in BriarPatch Cooperative of Nevada County, Inc., under the terms and conditions of ownership contained in the Bylaws and Ownership Disclosure.

**I/we agree to invest \$200 in co-ownership. I agree to this payment option:**

**\$200 in full** upon signing this application, for which I will receive a \$25 rebate gift card.

**\$20 now** and \$20 every 6 months until fully paid.

**\$10 now** and \$10 or \$20 every 6 months until fully paid.

**Patronage Dividend:** I understand that in order to track my expenditures toward a potential patronage dividend, I must present my owner card or number at checkout. I understand that any patronage dividend disbursements will be determined annually at the discretion of the Board of Directors in years when the Co-op nets a profit.

**Owner Communication:** I understand that BPFC will use my contact information for owner and/or legally required communications. I understand that text/SMS communications are optional and I may opt-out at any time.

**Text/SMS Notification:** The benefit of ownership is being part of a community. Keep up to date on the latest owner news or receive special deals and promotions via text/SMS. We keep things short and sweet – and always in the family. We won't share your contact information with third parties.

Official Owner Notices and Information  
(Such as your Election ballot)

Promotions and other fun stuff

**The Vine Newsletter:** Please choose one delivery option:

**Paperless, please!** We will email you a link to a PDF on the website.  **Paper newsletter,** delivered by U.S. mail.

**Are you a Senior, age 62 or older?**  Yes  No

BriarPatch Food Co-op currently offers Seniors 5% discounts on all items every Wednesday and 2% discounts on other days. (This discount is offered at the discretion of store management and is subject to change.)

\_\_\_\_\_  
**Legal Name of Primary Owner** (Only primary owner can vote or make changes.)

\_\_\_\_\_  
**Additional Household Owner(s), if any**

\_\_\_\_\_  
**Residence Address**

\_\_\_\_\_  
**City**

\_\_\_\_\_  
**State**

\_\_\_\_\_  
**Zip**

\_\_\_\_\_  
**Mailing Address, if different** (Please notify BriarPatch if you move.)

\_\_\_\_\_  
**Daytime Phone**

\_\_\_\_\_  
**Alternate Phone Number**

\_\_\_\_\_  
**Email Address (Only used for BriarPatch communications.)**

\_\_\_\_\_  
**Alternate Email Address**

**X**

\_\_\_\_\_  
**Signature of primary owner**

\_\_\_\_\_  
**Date**

Staff use: Initials: \_\_\_\_\_ Amt. paid: \_\_\_\_\_ Owner no.: \_\_\_\_\_