

OWNERSHIP APPLICATION

Any person who supports the Renaissance Community Cooperative can join the Coop for \$100. Membership is for life – once you pay for the full membership fee, there are no annual renewal fees! Membership carries full voting privileges (one vote per membership). Your membership may carry your name and the name of one other household member. Members are able to vote and participate in the decision-making that decides just what kind of grocery store we have!

If you are unable to pay the full cost of membership at the time of this application, you can pay \$20 and enter into the RCC Payment Plan, making monthly payments (in increments of \$10 or more) until the full \$100 membership fee is paid. As long as you are current in your payments, you will have full membership rights, including voting rights.

Select the ownership	option that	best fit	s your	situati	on.
Make full payment today of \$10		al navman	t of ¢		
Enter the RCC Payment Plan to If you choose this option, you m	,	. ,			
	Please prin	t.	Today	y's Date: _	
Owner Name:					
Additional Household Member:					
Street Address:					
City:	State:	Zip: _			
Phone:	Email:				
What is your age? (Circle one): 12-17	18-24 25-30	31-40	41-50	51-64	65 or older

Renaissance Community Co-op

Payment Plan Agreement.

By signing this form, I am agreeing to participate in the Renaissance Community Cooperative Payment Plan. This means I have paid at least \$20 but less than \$100 toward my full lifetime membership, and that I am agree- ing to pay at least \$10 per month until I have paid the full \$100 membership fee.

I understand that payments are due and payable the first day of every month until I have paid my membership in full, and will be counted late if they are received later than the fifth day of the month.

I understand that the responsibility for making payments in a timely way falls on me, and I will endeavor to keep current with my payments whether I am reminded to pay or not.

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Signature:				
<u> </u>	Date:			
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received	Staff use only		Owner #:	:
received: Check Ca	Amount of payment: \$		Owner #:	:
of payment:	Amount of payment: \$ash)wner #:	
of payment: ☐ Check ☐ Ca	Amount of payment: \$	☐ Yes ☐ No		