



4 Principale Verner, ON P0H 2M0
 705-594-2354 1-800-361-9255
 INFO@COOPREGIONALE.COM

MEMBERSHIP APPLICATION - INDIVIDUAL

GENERAL INFORMATION

Dear Applicant:

Thank you for applying to purchase preferred shares of the Co-opérative Régionale Nipissing-Sudbury Ltd. Applications are reviewed once a month by the Board of Directors. Acceptance of your application will be mailed to you, after approval by the Directors. In order to have charge privileges, a credit application must be completed and approved as per our credit policy.

PERSONAL INFORMATION

Name:

Date of birth:

S.I.N.*:

Current address:

City:

Province:

Postal Code:

Phone:

E-mail:

CO-APPLICANT INFORMATION

Name:

Date of birth:

S.I.N.*:

Phone:

E-mail:

PRODUCTS AND SERVICES

PETROLEUM:

PROPANE:

GAS STATION:

AG CENTER:

HARDWARE:

FURNACE SERVICE:

*PLEASE NOTE:

Individuals are now required to provide their Social Insurance Number to persons who must prepare T4A or T5 information slips in their name. A \$100.00 PENALTY from Revenue Canada will apply to individuals who refuse to provide their Social Insurance Number.

I understand but refuse to provide my SIN: Applicant

Co-Applicant

FEE

Membership Fee: \$20.00 (2 shares of \$10.00) required

Method of payment: Cash

Online: Confirmation number _____

Cheque: Cheque Number: _____

SIGNATURES

Signature of applicant:

Date:

Signature of co-applicant (only if for a joint application):

Date:

FOR OFFICE USE ONLY:

this confirms that the above application for shares has been approved as of this date, at the regular meeting of the Board of Directors. Please keep this copy as proof of ownership of common shares.

ACCOUNT NO: _____

DATE: _____

CERTIFICATE NO: _____

PRESIDENT'S SIGNATURE: _____