



## Merrimack Valley Food Co-op Member-Owner Agreement

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PLEASE PRINT

Date \_\_\_\_\_

**Member or Household Representative:** (person who will vote and receive any Patronage Refunds)

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

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

**Additional Household Members: (full names)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How did you hear about the Co-op? \_\_\_\_\_

Full Payment: One-time Investment of \$150.00 (Check or Money Order)

Payment Plan: Invest \$25 of equity and then pay installments of no less than \$25 within 6 months until the full \$150 commitment is reached.

### Disclaimer and Signature

I understand that I am committing to adhere to the by-laws and policies of Merrimack Valley Food Co-op at present and in the future. I understand that funds covered by this agreement are subject to risks inherent in any start-up enterprise and that such risk may result in loss of part or all of such funds.

Signature: \_\_\_\_\_

*Please complete and return with payment to: MVFC c/o 91 Columbia Park Haverhill, MA 01830*