

City onion River Co-op Market Member Equity Form

Have you ever been a Member of	the Co-op?	
Yes, my Member Number is _		
If you do not know your mem		r, please ask your cashier!
☐ No, I am signing up for the fir	st time.	
Head of Household (Account Own	ner)	☐ Senior (60+) - 5% <i>Discount</i>
First Name:	Last N	ame:
Mailing Address:		
City:	State:	Zip:
Email:		
Phone:		Cell Phone
☐ Please text reminders about Mo	embership (expiration date(s)
☐ Please email monthly updates a	about store	news and events
☐ Please email about Member W	orker oppo	rtunities
Household Members (please print and will shop under this account)		•
Full equity is currently set at \$200, divided full benefits with their first equity payment only applied when your account is current privileges, and ability to request changes to Print Name:	l into annual (\$15). Disco or paid in ful account are	payments of \$15. Members receive bunts and Patronage Refunds are Il. Patronage Refund checks, voting tied to head of household.
Signature:		Date:
Your Community-		

Downtown 82 S. Winooski Ave · South End 207 Flynn Ave Burlington, VT · www.citymarket.coop

For Staff Use Only

Member Type (check all that apply)		
New Member□ Current Member□ Employee□ Delivery	CS Only Member Type □ Co-op □ Non-Profit □ Food for All □ Renew	
Actions Phone Number Update Email Address Update Address Update Card Reprint (please indicate quantity) card(s) keytag(s) Seeing Red? If you see an option in red it should be performed only by key staff at Customer Service	CS Only Actions ID Checked (required for all) Equity Refund Request Equity Transfer Request Transferring equity to account #: Name: Name: Name Change Same Person? Yes No Existing Name: First: Last: New Name: First: Last:	
Must be Completed!		
Date: Staff Name:		
Member # Equity Purchased \$		
	REV 10/22	