

CO-OP POWER MEMBER-OWNER APPLICATION

First Name:		Last Name:	
Other adults who live at the same address who can use this Member Account (up to 4):			
Address:			
City:		State:	Zip:
Day Phone:	Evening Phone:		Fax:
SSN:	Email (please include):		

Choose one of the following Membership Options.

- Standard Member:** I agree to pay \$975 for my member share.
- Farmer Member:** I certify that I receive more than \$2,000 a year in earnings from farming, horticulture, forestry, or fishing. I agree to pay \$750 for my member share.
- Limited Resource Member:** I certify that I have an income of less than \$30,000/year and assets worth less than \$25,000 excluding my home. I agree to pay \$500 for my member share.
- Buying Group Member:** I agree to pay \$250 for my member share for access to buying group benefits.

Choose one of the following five payment options.

- It's enclosed:** I have enclosed \$ _____.
- Charge it:** Bill my credit card (below) for \$ _____. (Only one-time charges can be accepted. Checks are preferred!)
- Work Exchange:** I would like to work in exchange for a membership. We'll hire you to do that work, give you a check, give you a 1099 or a W-2 documenting your earnings for your taxes at the end of the year, and you can purchase your membership by signing the check back over to Co-op Power. Attach info on what you would like to do.
- My Own Payment Plan:** I have enclosed \$ _____. I agree to send in \$ _____ every [__ month, __ quarter, or __ year] until I have finished paying for my member equity share. (The sooner we have our money, the sooner your Local Council can use it to help build the green products and services you need in your community!)
- Automatic Withdrawal Payment Plan:** Please sign me up for the Automatic Bank Account Withdrawal Program for the bank account listed below. Please withdraw the 1st payment within 30 days and then withdraw the monthly payment for the number of months shown. (The monthly payment includes a service charge of \$2.50/month.)

Type of Membership	1 st Payment	# of Months	Monthly Payment
Standard Member	\$365	24	\$30
Farmer Member	\$260	24	\$25
Limited Resource Member	\$55	60	\$12
Buying Group Member	\$85	11	\$15

Payment Information if you have chosen to bill your credit card:

Credit Card Type: <input type="checkbox"/> MC <input type="checkbox"/> Visa	Credit Card #:	3 Digit Code:	Exp Date:
Name on Card:		Telephone:	
Billing Address:			
City:	State:	Zip Code:	

Monthly Payment Information: If you have chosen the automatic withdrawal payment plan:

Financial Institution:	Branch:	<input type="checkbox"/> Checking <input type="checkbox"/> Savings
City:	State:	Zip Code:
Bank Routing #:	Account #:	

I am signing up to be a member owner of Co-op Power using the payment option indicated above. I am joining with other members to create a sustainable and just energy future in our region by pooling our capital, purchasing power, and voting power. I will make an effort to purchase energy through the Co-op when the price, quality, and service work for me. I will let Co-op Power know when it is meeting or exceeding my expectations and when I have suggestions. I will participate in my local Community Energy Co-op and Co-op Power membership meetings to build consensus on how to move our cooperative forward. I understand my equity share is not an investment that provides a return or dividend and that it will not appreciate in value. I understand that I cannot sell my equity share and that I can only transfer it as a gift to a member of my immediate family. I agree to abide by the Co-op Power articles of incorporation, by-laws and membership rules found on www.cooppower.coop. I understand that if I don't provide Co-op Power with my current address for more than three consecutive years, my membership will be terminated and my equity donated to Co-op Power. I understand my equity share is equal to 50% of my member share and that it is refundable if I cancel my membership. I understand that my equity can only be returned when the Co-op has the funds to do so. I understand my equity share entitles me to the benefits of membership in Co-op Power.

Signed:	Date:
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